## PHA Plan

5 Year Plan for Fiscal Years 2005 - 2009 Annual Plan for Fiscal Year 2005

The Housing Authority of the City of Sanford, North Carolina

NC035v02

### PHA Plan Agency Identification

PHA Name: Sanford Housing Authority	
PHA Number: NC035	
PHA Fiscal Year Beginning: (mm/yyyy) 10/2005 Public Access to Information	
Information regarding any activities outlined in this plan car contacting: (select all that apply)  Main administrative office of the PHA PHA development management offices PHA local offices  Display I costions For PHA Plans and Supporting I	·
The PHA Plans (including attachments) are available for public is that apply)  Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below)	
PHA Plan Supporting Documents are available for inspection at:  Main business office of the PHA PHA development management offices Other (list below)	(select all that apply)

### 5-YEAR PLAN PHA FISCAL YEARS 2005 - 2009

[24 CFR Part 903.5]

<b>A</b>	TA # *	•
<b>A.</b>	VII	ssion
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14 IVAISSION	
State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)	
The mission of the PHA is the same as that of the Department of Housing and	
Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.	
The PHA's mission is: (state mission here)	
B. Goals	
The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those	
emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or	
identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own,	
PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF	
SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.	
(Quantifiable measures would include targets such as: numbers of families served or PHAS scores	
achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.	

## **HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

$\boxtimes$	PHA (	Goal: Expand the supply of assisted housing
	Object	tives:
		Apply for additional rental vouchers: As NOFAs are issued.
		Reduce public housing vacancies:
		Leverage private or other public funds to create additional housing
		opportunities: Utilize leveraged private or public funds to create 5 new
		units every 5 years.
	$\boxtimes$	Acquire or build units or developments Acquire or construct 5 new units
		every 5 years.
		Other (list below) The Housing Authority will possibly project base up
		to 20% of its tenant based certificates or vouchers to assist with the
		financing and development of new affordable housing.

$\boxtimes$	PHA	Goal: Improve the quality of assisted housing
	Objec	etives:
	$\boxtimes$	Improve public housing management: (PHAS score) Increase 1% over
		5 year period.
	Ш	Improve voucher management: (SEMAP score)
	$\boxtimes$	Increase customer satisfaction: <b>Provide staff training through</b>
		independent agencies annually & improve Resident Survey Score by
		1% every 3 years.
		Concentrate on efforts to improve specific management functions: (list;
		e.g., public housing finance; voucher unit inspections)
		Renovate or modernize public housing units: Utilize 50% of Annual
		Capital Funds for Physical Improvements.
		Demolish or dispose of obsolete public housing: <b>Demolish or dispose of</b>
	<b>5</b>	distressed Public Housing Units upon receipt of HUD approval.
		Provide replacement public housing: Provide mixed finance replacement
	<b>5</b>	housing after approval of demolition or deposition.
	$\boxtimes$	Provide replacement vouchers: <b>Apply for Section 8 to provide</b>
		replacement housing after demolition or disposition.
	Ш	Other: (list below)
	DIIA	
		Goal: Increase assisted housing choices
	Objec	
		Provide voucher mobility counseling:  Conduct outrooch efforts to potential yougher landlards: Contact at least
		Conduct outreach efforts to potential voucher landlords: Contact at least
		5 potential landlords per annum.
		Increase voucher payment standards Implement voucher homeownership program: <b>Partner with Agency Nn-</b>
		Profit to implement homeownership program.
		Implement public housing or other homeownership programs:
	H	Implement public housing site-based waiting lists:
	H	Convert public housing to vouchers:
	H	Other: (list below)
	Ш	Other. (list below)
HUD	Strates	gic Goal: Improve community quality of life and economic vitality
$\boxtimes$		Goal: Provide an improved living environment
	Objec	
	$\boxtimes$	Implement measures to deconcentrate poverty by bringing higher income
	<del></del>	public housing households into lower income developments: <b>Implement</b>
		flat rents at a level to encourage rental by higher income households.
		Implement measures to promote income mixing in public housing by
	_	assuring access for lower income families into higher income
		developments:

		Implement public housing security improvements: <b>Provide security measures during next 5 years.</b> Designate developments or buildings for particular resident groups (elderly, persons with disabilities): <b>Continue to manage Stewart Manor</b>
		(NC35-4) & Matthews Court (NC35-2) as elderly/handicapped. Other: (list below)
	Strateg dividua	ic Goal: Promote self-sufficiency and asset development of families als
⊠ housel		Increase the number and percentage of employed persons in assisted families: <b>Increase employed families by 1% per annum.</b> Provide or attract supportive services to improve assistance recipients'
		employability: <b>Partner with welfare-to-work agencies.</b> Provide or attract supportive services to increase independence for the elderly or families with disabilities: Other: (list below)
HUD	Strateg	ic Goal: Ensure Equal Opportunity in Housing for all Americans
	PHA O Object	Goal: Ensure equal opportunity and affirmatively further fair housing ives:  Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:  Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:  Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:  Other: (list below) Continue current procedures & implement new procedures every 2 years.
Other	PHA (	Goals and Objectives: (list below)
		Stabilize occupancy; objective – reduce evictions and turnovers by 2% per annum.

### Annual PHA Plan PHA Fiscal Year 2005

[24 CFR Part 903.7]

1. 11muai i ian i ypc.
Select which type of Annual Plan the PHA will submit.
Standard Plan
Streamlined Plan:
High Performing PHA
Small Agency (<250 Public Housing Units)
Administering Section 8 Only
Troubled Agency Plan
11 oubled Agency I fair

### ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Annual Plan Tyne

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Public Housing Agency Plan has been completed pursuant to the requirements of the Quality Housing and Work Responsibility Act of 1998 (QHWRA) and 24 CFR Part 903as published in the Federal Register of October 21, 1999.

The PHA's mission is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination, and its goals are: Improve public housing management; renovate or modernize public housing units; implement public housing or other homeownership programs; and provide educational materials which promote healthy and stable families.

The PHA has already purchased lots to construct replacement housing units. The goal is to construct 5 units should funds allow. Bidding is scheduled to begin 10/1/055 The goal for the units is to ultimately use them for homeownership. The PHA will also begin administering a separate Section 8 Homeownership Program beginning 10/05.

The Agency Plan is consistent with HUD's Strategic Goals and Objectives and it addresses housing needs, financial resources, policies on eligibility, selection and admissions, rent determination policies, capital improvement needs, demolition and disposition, homeownership, crime and safety, civil rights, and deconcentration.

Definitions of what constitutes a "substantial deviation" from the 5 Year Plan and a "significant amendment or modification" to either the 5 Year Plan of Annual Plan is included in the Agency Plan.

Pursuant to HUD requirements, the Housing Authority continues to re-access its self evaluation, needs assessment & transition plan to provide compliance w/ 504 requirements.

### iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

### **Required Attachments:**

Kequi	reu Au	aciments.
A		Admissions Policy for Deconcentration
В	$\boxtimes$	FY 2005 Capital Fund Program Annual Statement
		Most recent board-approved operating budget (Required Attachment for PHAs that are
	trouble	ed or at risk of being designated troubled ONLY)
<b>Option</b>	nal Atta	nchments:
		PHA Management Organizational Chart
$\mathbf{C}$		FY 2005 Capital Fund Program 5 Year Action Plan
		Public Housing Drug Elimination Program (PHDEP) Plan
		Comments of Resident Advisory Board or Boards (must be attached if not included in
	PHA P	Plan text)

Other (List below, providing each attachment name)

**D** - PHA Certifications and Board Resolutions.

**E** - Statement of Consistency with the Consolidated Plan.

F - FY2005 RHF Annual Statement

G - FY2004 CFP P & E Report

H - FY2004 RHF P & E Report

I - FY2003 CFP P & E Report 50203

J – FY2003 RHF P & E Report

K - FY2002 RHF P & E Report

L - FY 2001 RHF P & E Report

M - FY 2000 RHF P & E Report

**N - FY 1999 RHF P & E Report** 

O – Statement of Compliance with Community Service Requirement

P - Community Service Policy

 $\mathbf{Q}-\mathbf{Progress}$  on FY2000 Missions & Goals

R - Resident Member on the PHA Governing Board

S- Membership of the Resident Advisory Board or Boards

T - Management Organizational Chart

U - Voluntary Conversion Initial Assessments

V - Project Based Voucher Explanation

W- Amendments to Section 8 Administrative Plan

X - Section 8 Homeownership Statement

 ${f Y}$  - New Project Based Assistance Selection Policy

**Z** - Capital Fund Grant Leveraging Loan Budget

### **Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Revie				
Applicable & On Display	Supporting Document	Applicable Plan Component			
✓	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
✓	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans			
✓	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
✓	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
✓	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;			
✓	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
✓	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
<b>√</b>	<ol> <li>Public Housing Deconcentration and Income Mixing Documentation:</li> <li>PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and</li> <li>Documentation of the required deconcentration and income mixing analysis</li> </ol>	Annual Plan: Eligibility, Selection, and Admissions Policies			
✓	Public housing rent determination policies, including the methodology for setting public housing flat rents  Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
✓	Schedule of flat rents offered at each public housing development  check here if included in the public housing  A & O Policy	Annual Plan: Rent Determination			
✓	Section 8 rent determination (payment standard) policies    Check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination			
✓	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance			
✓	Public housing grievance procedures    Check here if included in the public housing     A & O Policy	Annual Plan: Grievance Procedures			

	List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Applicable Plan Component				
<b>✓</b>	Section 8 informal review and hearing procedures    check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures				
✓	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs				
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs				
✓	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs				
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs				
✓	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition				
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing				
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing				
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership				
✓	Policies governing any Section 8 Homeownership program  Check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership				
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency				
✓	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency				
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency				
✓	The most recent Public Housing Drug Elimination Program (PHEDEP) semi- annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention				
✓	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit				
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs				
✓	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency				
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)				
✓	Deconcentration Analysis	On File at PHA				

### 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction								
by Family Type								
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion	
Income <= 30% of AMI	1,252	5	2	3	4	3	2	
Income >30% but <=50% of AMI	978	5	2	3	4	3	2	
Income >50% but <80% of AMI	1000	3	2	3	4	2	2	
Elderly	594	5	2	3	4	4	2	
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

Consolidated Plan of the Jurisdiction/s
Indicate year:
U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
American Housing Survey data
Indicate year:
Other housing market study
Indicate year:
Other sources: (list and indicate year of information)

## **B.** Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List				
	Waiting list type: (select one)  Section 8 tenant-based assistance			
Public Housing	seu assistance			
	8 and Public Housing			
l ==	e-Based or sub-jurisdiction	nal waiting list (ontional)		
	which development/subjur			
	# of families	% of total families	Annual Turnover	
Waiting list total	252	100%	170	
Extremely low income <=30% AMI	226	90%		
Very low income (>30% but <=50% AMI)	22	9%		
Low income (>50% but <80% AMI)	4	1%		
Families with children	N/A	N/A		
Elderly families	7	3%		
Families with Disabilities	6	2%		
	83	33%		
Race/ethnicity WHITE Race/ethnicity BLACK	139	55%		
Race/ethnicity HISP.	20	8%		
Race/ethnicity Pac. Isl.	7	3%		
Race/ethnicity Ind./Alas	3	1%		
Race/ethnicity ind./Aras	3	1 /0		
Characteristics by				
Bedroom Size (Public				
Housing Only)				
0BR	39	15%		
1BR	93	37%		
2 BR	76	30%		
3 BR	33	13%		
4 BR	7	3%		
5 BR	3	1%		
6+BR	1	1%		
Is the waiting list closed (select one)? No Yes If yes:				
How long has it been closed (# of months)?  Does the PHA expect to reopen the list in the PHA Plan year?  No Yes				
Does the PHA pe	rmit specific categories of	f families onto the waiting l	ist, even if generally closed?	

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)  Section 8 tenant-based assistance Public Housing			
Combined Section 8			
Public Housing Site-l	Based or sub-jurisdiction	al waiting list (optional)	
If used, identify wh	ich development/subjuri	sdiction:	
	# of families	% of total families	Annual Turnover
Waiting list total	163		70
Extremely low income <=30% AMI	151	93%	
Very low income (>30% but <=50% AMI)	9	6%	
Low income	3	1%	
(>50% but <80% AMI)	27/4	NT/4	
Families with children	N/A	N/A	
Elderly families	4	2%	
Families with Disabilities	3	2%	
Race/ethnicity WHITE	33	20%	
Race/ethnicity BLACK	121	74%	
Race/ethnicity HISPANIC	5	3%	
Race/ethnicity INDIAN/ALASkAN	4	3%	
			1
Characteristics by Bedroom Size (Public			
Housing Only)  0BR	1	1%	
1BR	38	23%	
2 BR	72	44%	
3 BR	51	31%	
4 BR	1	1%	
5 BR	1	1 /0	
6+ BR			
Is the waiting list closed (select one)? No Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year?  No Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
☐ No ☐ Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### REFER TO THE FOLLOWING STRATEGIES AND REASONS

### (1) Strategies

Need: Shortage of affordable housing for all eligible populations

## Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply			
	Employ effective maintenance and management policies to minimize the number of public		
	housing units off-line		
	Reduce turnover time for vacated public housing units		
	Reduce time to renovate public housing units		
	Seek replacement of public housing units lost to the inventory through mixed finance development		
	Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources		
	Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction		
	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required		
	Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly		
	those outside of areas of minority and poverty concentration		
	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program		
	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies		
	Other (list below) Continue to maximize the number of affordable units available.		
Strate	gy 2: Increase the number of affordable housing units by:		
	Il that apply		
	Apply for additional section 8 units should they become available		
$\boxtimes$	Leverage affordable housing resources in the community through the creation of mixed -		
finance housing			
	Pursue housing resources other than public housing or Section 8 tenant-based assistance. Other: (list below)		

## Strategy 1: Target available assistance to families at or below 30 % of AMI Select all that apply Exceed HUD federal targeting requirements for families at or below 30% of AMI in public Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenantbased section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work: Continue to support working families. Other: (list below) Need: Specific Family Types: Families at or below 50% of median Strategy 1: Target available assistance to families at or below 50% of AMI Select all that apply Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work: Continue to support working families. Other: (list below) Need: Specific Family Types: The Elderly **Strategy 1: Target available assistance to the elderly:** Select all that apply Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below) Need: Specific Family Types: Families with Disabilities Strategy 1: Target available assistance to Families with Disabilities: Select all that apply Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

#### Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: Select if applicable Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below) Strategy 2: Conduct activities to affirmatively further fair housing Select all that apply  $\boxtimes$ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units Market the section 8 program to owners outside of areas of poverty /minority concentrations Other: (list below) Other Housing Needs & Strategies: (list needs and strategies below) (2) Reasons for Selecting Strategies Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue: Funding constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance

Results of consultation with local or state government

Results of consultation with advocacy groups

Other: (list below)

Results of consultation with residents and the Resident Advisory Board

### 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

	inancial Resources: nned Sources and Uses	
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)	·	
a) Public Housing Operating Fund	\$779,971.00	
b) Public Housing Capital Fund	\$635,802.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant- Based Assistance	1,482,957.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below) RHF 05	\$28,961.00	Replacement Housing
2. Prior Year Federal Grants (unobligated funds only) (list below)	4100 410 00	
RHF 99, 00, 01, 02, 03 & 04	\$180,518.00	Replacement Housing
CFP 04	\$113,694.00	Modernization
CFP 03 50203	\$4,734.00	Modernization
3. Public Housing Dwelling Rental Income		
FFY05 Rental Income Estimates	\$806,960.00	Operation & Maintenance
4. Other income (list below)		
Investment Interest	\$10,500.00	Operation, Maintenance & Reserves
Other Income  5. Non-federal sources (list below)	\$105,210.00	Operation, Maintenance & Reserves
Total resources	\$4,149,307.00	

# 3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.7 9 (c)]

A. Public Housing
Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.
(1) Eligibility
<ul> <li>a. When does the PHA verify eligibility for admission to public housing? (select all that apply)</li> <li>When families are within a certain number of being offered a unit: (state number) 3-4</li> <li>When families are within a certain time of being offered a unit: (state time)</li> <li>Other: (describe)</li> </ul>
<ul> <li>b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?</li> <li>Criminal or Drug-related activity</li> <li>Rental history</li> <li>Housekeeping</li> <li>Other (describe)</li> </ul>
c. \( \subseteq \text{ Yes } \subseteq \text{ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?} \) d. \( \subseteq \text{ Yes } \subseteq \text{ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?} \) e. \( \subseteq \text{ Yes } \subseteq \text{ No: Does the PHA access FBI criminal records from the FBI for screening purposes?} \) (either directly or through an NCIC-authorized source)
(2)Waiting List Organization  a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)
Community-wide list Sub-jurisdictional lists Site-based waiting lists Other (describe)  b. Where may interested persons apply for admission to public housing? PHA main administrative office PHA development site management office Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) <b>Assignment</b>
1. How many site-based waiting lists will the PHA operate in the coming year? <b>NONE</b>
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously If yes, how many lists?
<ul> <li>4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?</li> <li>PHA main administrative office</li> <li>All PHA development management offices</li> <li>Management offices at developments with site-based waiting lists</li> <li>At the development to which they would like to apply</li> <li>Other (list below)</li> </ul>
(3) Assignment
<ul> <li>a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)</li> <li>One</li> <li>Two</li> <li>Three or More</li> </ul>
b. Xes No: Is this policy consistent across all waiting list types?
c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:
(4) Admissions Preferences
<ul> <li>a. Income targeting:</li> <li>☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?</li> </ul>

b. Tran	asfer policies:
In wha	t circumstances will transfers take precedence over new admissions? (list below)
$\boxtimes$	Emergencies
	Overhoused
$\overline{\boxtimes}$	Underhoused
$\overline{\boxtimes}$	Medical justification
$\overline{\square}$	Administrative reasons determined by the PHA (e.g., to permit modernization work)
	Resident choice: (state circumstances below)
	Other: (list below) Disability – to make appropriate unit.
_	
	eferences
1.	Yes No: Has the PHA established preferences for admission to public housing (other than
	date and time of application)? (If "no" is selected, skip to subsection (5)
	Occupancy)
	nich of the following admission preferences does the PHA plan to employ in the coming year?
(se	lect all that apply from either former Federal preferences or other preferences)
Forma	r Federal preferences:
	Involuntary Displacement (Disaster, Government Action, Action of Housing
Ш	Owner, Inaccessibility, Property Disposition)
	Victims of domestic violence
H	
H	Substandard housing
	Homelessness
Ш	High rent burden (rent is > 50 percent of income)
Other 1	preferences: (select below)
	Working families and those unable to work because of age or disability
	Veterans and veterans' families
Ħ	Residents who live and/or work in the jurisdiction
	Those enrolled currently in educational, training, or upward mobility programs
H	Households that contribute to meeting income goals (broad range of incomes)
H	Households that contribute to meeting income requirements (targeting)
H	Those previously enrolled in educational, training, or upward mobility programs
H	Victims of reprisals or hate crimes
	Other preference(s) (list below)

equal w	nts your first priority, a "2" in the box representing your second priority, and so on. If you give weight to one or more of these choices (either through an absolute hierarchy or through a point ), place the same number next to each. That means you can use "1" more than once, "2" more ace, etc.
1 Date	and Time
	Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other p	Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
	ntionship of preferences to income targeting requirements:  The PHA applies preferences within income tiers  Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements
(5) Occ	<u>cupancy</u>
	t reference materials can applicants and residents use to obtain information about the rules of apancy of public housing (select all that apply)  The PHA-resident lease  The PHA's Admissions and (Continued) Occupancy policy  PHA briefing seminars or written materials  Other source (list)
b. How	often must residents notify the PHA of changes in family composition? (select all that apply) At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that

(6) De	concentration	n and Inco	ome Mixing		
a. 🔀	Yes No:	develop	e PHA have any general occupancy ments covered by the deconcentrati e. If yes, continue to the next ques	on rule? If no, this section is	
b. 🗌	Yes No:	85% to 1	of these covered developments hav 115% of the average incomes of all s complete.	_	
If yes,	list these deve	elopments	as follows:		
		Deconce	entration Policy for Covered Developme	ents	
Devel	opment Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)((iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]	
Unless (vouche	otherwise specifiers, and until considers is the extension of Criminal and More general	t of screen drug-relate drug-relate screening	inister section 8 are not required to completions in this section apply only to the terged into the voucher program, certification conducted by the PHA? (select d activity only to the extent require ted activity, more extensively than a than criminal and drug-related act family obligation during a two y	nant-based section 8 assistance practices).  all that apply) d by law or regulation required by law or regulation ivity (list factors below) <b>Scre</b>	een
		f prior par to repay.	mily must pay any outstanding d rticipation in any federal housing		
b. 🔀	Yes No: 1		HA request criminal records from Ing purposes?	ocal law enforcement agencie	es for
c. [	Yes No:		PHA request criminal records from ng purposes?	State law enforcement agenci	ies for
d. 🗌	Yes No:		PHA access FBI criminal records for directly or through an NCIC-author		poses?

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
<ul> <li>Criminal or drug-related activity</li> <li>Other (describe below) Previous address &amp; landlord; current address &amp; landlord.</li> </ul>
Since (describe below) 170 vious address & innuivia, current address & innuivia.
(2) Waiting List Organization
a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting
list merged? (select all that apply)
None Federal public housing
Federal moderate rehabilitation
Federal project-based certificate program
Other federal or local program (list below)
<ul> <li>b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)</li> </ul>
PHA main administrative office
Other (list below) <b>Section 8 Office.</b>
(3) Search Time
a. X Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?
If yes, state circumstances below:
Extenuating circumstances, family emergency, hospitalization, reasonable effort did not produce unit. A disabled family unable to find unit due to disability requirement.
(4) Admissions Preferences a. Income targeting
Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
<ul> <li>b. Preferences</li> <li>1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)</li> </ul>

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income)
Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in your jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
1 Date and Time
Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in your jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)

	Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
4. Am (select ⊠	ong applicants on the waiting list with equal preference status, how are applicants selected? one)  Date and time of application  Drawing (lottery) or other random choice technique
5. If the (select	ne PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" one)  This preference has previously been reviewed and approved by HUD  The PHA requests approval for this preference through this PHA Plan
6. Rel □ ⊠	ationship of preferences to income targeting requirements: (select one)  The PHA applies preferences within income tiers  Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements
(5) S <sub>1</sub>	pecial Purpose Section 8 Assistance Programs
adm	which documents or other reference materials are the policies governing eligibility, selection, and hissions to any special-purpose section 8 program administered by the PHA contained? (select all apply)  The Section 8 Administrative Plan  Briefing sessions and written materials  Other (list below)
	ow does the PHA announce the availability of any special-purpose section 8 programs to the blic?  Through published notices  Other (list below) Flyers and through local government service providers.

## **4. PHA Rent Determination Policies** [24 CFR Part 903.7 9 (d)]

	D	L 1: ~		~ <b>-</b> -	
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Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

	ich of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to aploy (select all that apply)  For the earned income of a previously unemployed household member  For increases in earned income  Fixed amount (other than general rent-setting policy)  If yes, state amount/s and circumstances below:
	Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
	For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)
e. Ceil	ing rents
1. Do	you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)
	Yes for all developments Yes but only for some developments No
2. Fo	r which kinds of developments are ceiling rents in place? (select all that apply)
	For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below) Not Applicable
3. Sel	lect the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

<ol> <li>Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)         <ul> <li>Never</li> <li>At family option</li> <li>Any time the family experiences an income increase</li> <li>Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)</li> <li>Other (list below) Increases in income must be reported between annual re-exams but rent is not increased.</li> </ul> </li> </ol>
g.   Yes   No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?
(2) Flat Rents
<ol> <li>In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)</li> <li>The section 8 rent reasonableness study of comparable housing</li> <li>Survey of rents listed in local newspaper</li> <li>Survey of similar unassisted units in the neighborhood</li> <li>Other (list/describe below)</li> </ol> B. Section 8 Tenant-Based Assistance
Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
(1) Payment Standards
Describe the voucher payment standards and policies.
<ul> <li>a. What is the PHA's payment standard? (select the category that best describes your standard)</li> <li>At or above 90% but below100% of FMR</li> <li>100% of FMR</li> <li>Above 100% but at or below 110% of FMR</li> <li>Above 110% of FMR (if HUD approved; describe circumstances below)</li> </ul>
<ul> <li>b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)</li> <li>FMRs are adequate to ensure success among assisted families in the PHA's segment of the</li> </ul>
FMR area  The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket  Other (list below) Not Applicable

f. Rent re-determinations:

c. If th	ne payment standard is higher than FMR, why has the PHA chosen this level? (select all that
app	ly)
	FMRs are not adequate to ensure success among assisted families in the PHA's segment of the
	FMR area
	Reflects market or submarket
	To increase housing options for families
$\overline{\boxtimes}$	Other (list below) Not Applicable
d. Ho ⊠	ow often are payment standards reevaluated for adequacy? (select one)  Annually  Other (list below)
e. Wh	at factors will the PHA consider in its assessment of the adequacy of its payment standard?
	ect all that apply)
$\boxtimes$	Success rates of assisted families
$\boxtimes$	Rent burdens of assisted families
	Other (list below)
(2) Mi	nimum Rent
	at amount best reflects the PHA's minimum rent? (select one)
u. ****	\$0
	\$1-\$25
$\overline{\boxtimes}$	\$26-\$50
<u> </u>	
b. 🔀	Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below) <b>Resident hardship policy.</b>

### 5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

An organization chart showing the PHA's management structure and organization is attached.

A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year	Expected Turnover
	Beginning	100
Public Housing	447	180
Section 8 Vouchers	366	80
Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	N/A	N/A
Special Purpose Section	N/A	N/A
8 Certificates/Vouchers		
(list individually)		
Public Housing Drug	N/A	N/A
Elimination Program		
(PHDEP)		
Other Federal		
Programs(list		
individually)		

### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below) Management Procedural Policy, Rent Determination Policy, Pest control extermination on a weekly cycle, Safety Policy, Personnel Policy, Emergency Work Order Policy, Maintenance Plan & Inspection Policy, A & O Policy, Capitalization Policy, Disposition Policy, One Strike Policy, Procurement Policy, Grievance Policy, Travel Policy, Lease, Fraud Policy, SHA Cost Allocation Policy
- (2) Section 8 Management: (list below) Section 8 management Manual, A & O Policy, Administrative Plan, Briefing Packet, HQS, Pest Control addressed under HQS & Personnel Policy, One Strike Policy, Procurement Policy, Capitalization Policy, Disposition Policy, Investment Policy, Travel Policy, Fraud Policy, SHA Cost Allocation Policy, Section 8 Voucher Project Basing Policy.

### **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

are exempt from	m sub-component 6A.
A. Public H	Housing  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
If yes	s, list additions to federal requirements below:
grievanc PHA PHA	HA office should residents or applicants to public housing contact to initiate the PHA e process? (select all that apply)  main administrative office development management offices r (list below)
	8 Tenant-Based Assistance  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?
If yes	s, list additions to federal requirements below:
informal PHA Othe	HA office should applicants or assisted families contact to initiate the informal review and hearing processes? (select all that apply)  main administrative office r (list below)  ion 8 Office – 1000 Carthage Street

### 7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

### (1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select	one: The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment <b>B</b>
	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)
(2) O	ptional 5-Year Action Plan
Agencie using th	es are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template <b>OR</b> by completing and the group appropriate properly updated HUD-52834.
a. 🔀	Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
b. If y	res to question a, select one:  The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment C
	The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

# B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.
Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c;
if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)
1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)  Revitalization Plan under development
Revitalization Plan submitted, pending approval
Revitalization Plan approved
Activities pursuant to an approved Revitalization Plan underway
Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:
Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:
Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual
Statement? If yes, list developments or activities below:
8. Demolition and Disposition  [24 CFR Part 903.7 9 (h)]
Applicability of component 8: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan
Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description		
Yes No:	Has the PHA provided the activities description information in the <b>optic</b> Public Housing Asset Management Table? (If "yes", skip to component "No", complete the Activity Description table below.)	
	Demolition/Disposition Activity Description	
1a. Development nan	ne: Linden Heights Development – 235, 236, 237 & 238 Tally Ave.	
	oject) number: NC035-001A	
2. Activity type: Der		
Dispo		
3. Application status	(select one)	
Approved	ending approval	
Planned appli	<u> </u>	
	pproved, submitted, or planned for submission: 10/30/04	
5. Number of units at		
6. Coverage of action		
Part of the develo		
Total developme		
7. Timeline for activ	rojected start date of activity: 11/15/04	
_	and date of activity: 9/30/05	
9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities  [24 CFR Part 903.7 9 (i)]		
Exemptions from Compo	nent 9; Section 8 only PHAs are not required to complete this section.	
1. Yes No:	Has the PHA designated or applied for approval to designate or does the plan to apply to designate any public housing for occupancy only by the families or only by families with disabilities, or by elderly families and with disabilities or will apply for designation for occupancy by only elder families or only families with disabilities, or by elderly families and families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families with disabilities, or by elderly families and families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families are families or only families with disabilities, or by elderly families and families or only families are families or only families and families or only families are families are families or only families are famil	families erly nilies 37 (42 nt 10. If ne PHA

2. Activity Description	on	
Yes No:	Has the PHA provided all required activity description information for this	
	component in the optional Public Housing Asset Management Table? If "yes",	
	skip to component 10. If "No", complete the Activity Description table below.	
	signation of Public Housing Activity Description	
1a. Development nam		
1b. Development (pro	oject) number:	
2. Designation type:		
	only the elderly	
	families with disabilities	
	only elderly families and families with disabilities	
3. Application status		
	cluded in the PHA's Designation Plan	
	nding approval	
Planned appli		
	ion approved, submitted, or planned for submission: (DD/MM/YY)	
	his designation constitute a (select one)	
New Designation		
	viously-approved Designation Plan?	
6. Number of units a		
7. Coverage of actio		
Part of the develo	±	
Total developmen	nt	
	f Public Housing to Tenant-Based Assistance	
[24 CFR Part 903.7 9 (j)]	. 10 G d 0 1 DW	
Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.		
A. Assessments of F Appropriation	Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD ons Act	
1. ☐ Yes ⊠ No:	Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)	
2. Activity Description  Yes No:	Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.	

1a. Development name: 1b. Development (project) number:  2. What is the status of the required assessment?
1b. Development (project) number:  2. What is the status of the required assessment?  Assessment underway Assessment results submitted to HUD Assessment results approved by HUD (if marked, proceed to next question) Other (explain below)  3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  4. Status of Conversion Plan (select the statement that best describes the current status) Conversion Plan in development Conversion Plan submitted to HUD on: (DD/MM/YYYY) Conversion Plan approved by HUD on: (DD/MM/YYYY) Activities pursuant to HUD-approved Conversion Plan underway  5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) Units addressed in a pending or approved demolition application (date submitted or approved: Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: Requirements no longer applicable: vacancy rates are less than 10 percent
2. What is the status of the required assessment?  Assessment underway Assessment results submitted to HUD Assessment results approved by HUD (if marked, proceed to next question) Other (explain below)  3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  4. Status of Conversion Plan (select the statement that best describes the current status) Conversion Plan in development Conversion Plan submitted to HUD on: (DD/MM/YYYY) Conversion Plan approved by HUD on: (DD/MM/YYYY) Activities pursuant to HUD-approved Conversion Plan underway  5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) Units addressed in a pending or approved demolition application (date submitted or approved: Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: Requirements no longer applicable: vacancy rates are less than 10 percent
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(date submitted or approved: )  Requirements no longer applicable: vacancy rates are less than 10 percent
Requirements no longer applicable: vacancy rates are less than 10 percent
Requirements no longer applicable. Site now has less than 500 units
Other: (describe below)
U Other. (describe below)
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 193
B. Reserved for Conversions pursuant to Section 22 of the C.S. Housing Act of 173
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 193
C. Nesci yeu idi Conversions pursuant to section 33 di the U.S. mousing Act of 193

### 11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)]

A. Public Housing		
Exemptions from Compo	onent 11A: Section 8 only PHAs are not required to complete 11A.	
1. ☐ Yes ⊠ No:	Does the PHA administer any homeownership programs administered PHA under an approved section 5(h) homeownership program (42 U 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or applied or plan to apply to administer any homeownership programs section 5(h), the HOPE I program, or section 32 of the U.S. Housing (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", concativity description for each applicable program/plan, unless eligible a streamlined submission due to <b>small PHA</b> or <b>high performing PI</b> PHAs completing streamlined submissions may skip to component	J.S.C. has the PHA under g Act of 1937 omplete one e to complete HA status.
2. Activity Descript	Has the PHA provided all required activity description information to component in the <b>optional</b> Public Housing Asset Management Table skip to component 12. If "No", complete the Activity Description to	e? (If "yes",
	olic Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development nar		-
1b. Development (pr		
2. Federal Program a		1
HOPE I	autority.	
5(h)		
Turnkey	III	
Section 3	32 of the USHA of 1937 (effective 10/1/99)	
3. Application status	: (select one)	
	d; included in the PHA's Homeownership Plan/Program	
_	d, pending approval	
	application	_
	ship Plan/Program approved, submitted, or planned for submission:	
(DD/MM/YYYY)  5. Number of units	offootodi	_
<ul><li>5. Number of units</li><li>6. Coverage of action</li></ul>		
Part of the devel		
Total developme		
<u>+</u>		

B. Section 8 Ten	ant Based Assistance
1. Yes No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. <b>High performing PHAs</b> may skip to component 12.)
2. Program Descript	cion:
a. Size of Program  Yes No:	Will the PHA limit the number of families participating in the section 8 homeownership option?
participants?	to the question above was yes, which statement best describes the number of (select one) fewer participants 60 participants 100 participants than 100 participants
I	eligibility criteria  ll the PHA's program have eligibility criteria for participation in its Section 8  Homeownership Option program in addition to HUD criteria?  If yes, list criteria below:
	unity Service and Self-sufficiency Programs
	ponent 12: High performing and small PHAs are not required to complete this component. Section juired to complete sub-component C.
A. PHA Coordinat	ion with the Welfare (TANF) Agency
s 1	ements: s the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?  If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts  Client referrals	between the Pl	HA and TANF a	agency (select all tha	t apply)		
Client referrals Information sharing regarding mutual clients (for rent determinations and otherwise) Coordinate the provision of specific social and self-sufficiency services and programs to eligible families						
	grams					
Jointly administer programmer to administer a Joint administration of Other (describe)		e-to-Work vouc	her program			
Joint administration of	other demons	stration program				
Other (describe)						
B. Services and programs of	offered to resi	dents and part	icipants			
(1) General						
a. Self-Sufficiency Po	licies					
Which, if any of the fo	llowing discre	• •		•		
economic and social se apply)	eir-surriciency	or assisted rami	liles in the following	areas? (select all that		
Public housing	rent determina	ation policies				
Public housing Public housing Section 8 admi Preference in a Preferences for						
Section 8 admi	ssions policies	S				
Preference in a			in public housing far			
			_	tion programs for non-		
	_	r coordinated by		onti din ati an		
		_	eownership option p	_		
	Preference/eligibility for section 8 homeownership option participation Other policies (list below)					
	Other policies (list below)					
b. Economic and Social self-sufficiency programs						
Voc □ No: Do	os the DUA or	ordinata nroma	oto or provide env pr	corroms to anhance the		
∑ Yes ☐ No: Do		-		"yes", complete the		
			=	nily Self Sufficiency		
	_	-	ble may be altered to	•		
			<u>-</u>			
	Service	s and Program	S			
Program Name & Description	Estimated	Allocation	Access	Eligibility		
(including location, if appropriate)	Size	Method	(development office /	(public housing or		
		(waiting list/random	PHA main office / other provider name)	section 8 participants or		
		selection/specifi	other provider name)	both)		
		c criteria/other)		,		
FSS Program	26	I.D. & recruit	Section 8 Office	Section 8		
Resident Councils	20	Elections	Community based	Public Housing		

### (2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation				
Program	Required Number of Participants	Actual Number of Participants		
	(start of FY 2000 Estimate)	(As of: DD/MM/YY)		
Public Housing	N/A	N/A		
Section 8	22	26		

b. 🗌	does th	PHA is not maintaining the minite most recent FSS Action Plane at least the minimum programm ist steps the PHA will take belo	address the steps the PHA pasize?	•
C. Wo	elfare Benefit Reducti	ons		
193	1.0	th the statutory requirements of nent of income changes resultin	` '	
	11 .	changes to the PHA's public hos policies	ousing rent determination po	olicies and train
	Informing residents of Actively notifying residents	f new policy on admission and ridents of new policy at times in ng a cooperative agreement with	addition to admission and r	
	C	nation and coordination of servol for exchange of information v		gencies

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

### 13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Manor.

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents
<ol> <li>Describe the need for measures to ensure the safety of public housing residents (select all that apply)</li> <li>High incidence of violent and/or drug-related crime in some or all of the PHA's developments</li> <li>High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments</li> <li>Residents fearful for their safety and/or the safety of their children</li> <li>Observed lower-level crime, vandalism and/or graffiti</li> <li>People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime</li> <li>Other (describe below) The PHA monitors Security and Safety on an ongoing basis and works with local Law Enforcement to resolve issues in a timely manner. The PHA may lease apartments to Police personnel need arises.</li> </ol>
2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
<ul> <li>Safety and security survey of residents</li> <li>Analysis of crime statistics over time for crimes committed "in and around" public housing authority</li> <li>Analysis of cost trends over time for repair of vandalism and removal of graffiti</li> <li>Resident reports</li> <li>PHA employee reports</li> <li>Police reports</li> <li>Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs</li> <li>Other (describe below)</li> </ul>
3. Which developments are most affected? (list below) NC35-004 Stewart Manor
B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year
<ol> <li>List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)</li> <li>Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities</li> <li>Crime Prevention Through Environmental Design</li> <li>Activities targeted to at-risk youth, adults, or seniors</li> <li>Volunteer Resident Patrol/Block Watchers Program</li> </ol>
Other (describe below) Lease apartment for 1 year to City of Sanford Police Officer at NC35-4 Stewart

2. Which developments are most affected? (list below)

### NC35-003 Garden Street

### C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)
<ul> <li>□ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan</li> <li>□ Police provide crime data to housing authority staff for analysis and action</li> <li>□ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)</li> <li>□ Police regularly testify in and otherwise support eviction cases</li> <li>□ Police regularly meet with the PHA management and residents</li> <li>□ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services</li> <li>□ Other activities (list below)</li> </ul>
1. Which developments are most affected? (list below)  PHA-Wide
<b>D.</b> Additional information as required by PHDEP/PHDEP Plan PHAs eligible for FY 2001 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
<ul> <li>Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?</li> <li>Yes No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?</li> <li>Yes No: This PHDEP Plan is an Attachment.</li> </ul>

### 14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

### **SANFORD HOUSING AUTHORITY**

### PET POLICY REGARDING

House Rules Governing the Owning and Keeping of Household Pets

#### PET POLICY

Effective August 9, 2000, all residents in properties owned or managed by the Sanford Housing Authority (SHA) are allowed to own and keep certain common household pets in their respective units.

### **EXCLUSIONS**

This policy does not apply to animals that are used to assist persons with disabilities. Animals used to assist those residents with disabilities are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

To be excluded from the pet policy, the resident/pet owner must certify:

That there is a person with disabilities in the household; and

That the animal has been trained to assist with the specified disability.

### TYPES OF PETS

Those common household pets are limited to small dogs, small cats, tropical birds such as parakeets, budgies, etc.; and fish suitable for and commonly kept in a home aquarium. They do not include dangerous breeds of dogs (such as Doberman Pinschers, Pit Bulls, or Rottweilers) of any ages or size; any bird other than small tropical birds which are commonly kept as pets; or dangerous fish. No other animals other than those listed in this paragraph may be kept as pets on any Housing Authority property.

### **RULES FOR OWNING PETS**

- 1. Approval by the SHA as evidenced by a signed Pet Ownership Form must be obtained prior to a resident owning and/or keeping a pet in the dwelling unit.
- 2. There is a limit of one pet per dwelling unit, with the exception of fish and birds.
- 3. A dog or cat must not weigh over 20 pounds when fully grown. Dogs and cats must be on a leash and accompanied by the owner whenever outside the dwelling unit. Birds must be caged at all times. Aquariums cannot exceed ten (10) gallons of water each.
- 4. There is a mandatory pet deposit in an amount of \$150.00 for a dog or cat, one-half of which must be paid at the time of the execution of the Pet Ownership Form allowing the pet to be present. The balance of the pet deposit must be paid in monthly amounts no less than \$25.00 per month, exclusive of the rent or other charges until the full amount of the deposit is paid. The pet deposit is in addition to the security deposit paid by the resident.

The pet deposit may be used by the SHA in its discretion to pay for reasonable expenses directly attributable to the presence of the dog or cat in the property, including (but not limited to) the cost of repairs and replacement to, and fumigation's of, the resident's dwelling unit, as well as pet-caused damage to any public or common areas. In the event that the pet deposit or any part of it is used by the SHA to pay for such reasonable expenses, the SHA will notify the resident and the resident will be required to replenish the deposit in accordance with paragraph 1 of this rule.

The SHA shall refund the unused portion of the pet deposit to the resident within a reasonable time after the resident has moved from the property or no longer owns or keeps a pet in the dwelling unit.

- 5. Residents will be prohibited from owning and keeping pets in the dwelling unit or on SHA property, which the SHA reasonably believes to be dangerous to other residents, staff, or pets. This includes dangerous breeds of pets such as Doberman Pinschers, Pit Bulls and Rottweilers, regardless of their sizes.
- 6. Residents must abide by all state and local laws and ordinances governing the owning and keeping of pets, including all licensing and permit requirements, where applicable.
- 7. Pets must be registered with the SHA before they are brought onto SHA property. Registration includes certificate signed by a licensed veterinarian showing that the dog or cat has had all inoculations and has been spayed or neutered, and that the pet has no communicable disease(s) and is pest free.

#### PET CARE

- A. No outside cages, fences, or houses are permitted
- B. Waste shall be disposed of immediately and properly in sealed plastic bags. Litter in cat litter boxes must be disposed of no less than twice per week; waste must be scooped from cat litter boxes no less than daily. Precautions must be taken by the resident to eliminate odors and maintain sanitary conditions inside the unit.
- C. Food for pets must be sealed in a container kept inside the unit.
- D. Pets will not be allowed in areas such as lobbies, meeting rooms and laundry rooms. Dogs and cats must be carried on elevators and when passing through common areas to the outside. Dogs and cats must be kept on leashes when outside on SHA property.
- E. Dogs and cats cannot be left alone over (8) hours. The SHA will attempt to contact the pet owner or responsible parties designated by the pet owner if any pet has been left unattended for more than 24 hours; however, in the event the SHA is unable to obtain a favorable response to those efforts, the SHA may remove or cause the appropriate authorities to remove the pet to a kennel or other facility, which will be at the owner's expense.
- F. The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas. Repeated substantiated complaints by neighbors or SHA personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance may result in the owner having to remove the pet or move him/herself/

Pets who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one half hour or more to the disturbance of any other resident at any time during the day or night, shall be considered a nuisance.

- G. Residents cannot take pets with them while visiting other SHA residents. Visitors will not be allowed to bring pets onto SHA property for the purpose of either visiting or pet sitting. Neighbors who pet-sit must do so in the pet owner's apartment.
- H. Exterminations of fleas, mites, etc. at the pet owner's apartment will be the resident's responsibility; exterminations for fleas in common areas and in neighboring apartments shall be undertaken at the pet owner's expense.
- I. The SHA assumes no responsibility for pets during its own pest extermination program. The resident will be required to remove the pet during the SHA sponsored exterminations.
- J. The SHA reserves the right to inspect any pet owner's unit without prior notice if the SHA has reasonable cause to suspect the pet is not being cared for and/or that the resident is unable to care for the pet properly.
- K. The resident must be present during a scheduled dwelling unit inspection and any maintenance work order service if the unit is occupied by a dog, cat or other unrestrained ambulatory pet.

### PET SAFETY

- A. The SHA reserves the right to refuse pet ownership to any resident whom the SHA has reason to believe is unable to care for a pet properly.
- B. Pets are not to be left chained or leashed outside the dwelling unit or anywhere on SHA property.
- C. Pets must be leashed and restrained under the control of a responsible person while being exercised outside the resident's dwelling unit.
- D. Any pet waste must be scooped, bagged and properly disposed of immediately in all areas, including pet waste dropped outdoors.
- E. The SHA has the right to require removal of a pet if the pet's conduct or condition is determined to constitute a nuisance or threat to other residents, visitors, or staff.
- F. Any pet which bites, attacks or threatens a human or animal shall be removed from SHA property and permanently banned from all property owned by the SHA.

#### **EMERGENCIES**

- A. Prior to obtaining a pet, the resident must have at least two responsible persons who will sign a statement agreeing to remove the pet from the premises if the owner becomes ill or incapacitated or dies.
- B. The SHA has the right to remove the pet to a shelter at resident's expense in the case of emergency.

#### PET POLICY VIOLATION

If a determination is made on objective facts supported by written statements, that a resident/pet owner has violated the Pet Policy, written notice will be served.

The notice will contain a brief statement of the factual basis for the determination and the pet rule(s), which were violated. The notice will also state:

That the resident/pet owner has 7 days from the effective date of the service of notice to correct the violation or make written request for a meeting to discuss the violation;

That the resident pet owner is entitled to be accompanied by another person of his or her choice at the meeting; and

That the resident/pet owner's failure to correct the violation, request a meeting, or appear at a requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

#### NOTICE FOR PET REMOVAL

If the resident/pet owner and the SHA are unable to resolve the violation at the meeting or the pet owner fails to correct the violation in the time period allotted by the SHA, the SHA may serve notice to remove the pet.

The notice shall contain:

A brief statement of the factual basis for the SHA's determination of the Pet Rule that has been violated;

The requirement that the resident/pet owner must remove the pet within 7 days of this notice; and

A statement that failure to remove the pet may result in the initiation of termination of tenancy procedures.

### TERMINATION OF TENANCY

The SHA may initiate procedures for termination of tenancy based on a pet rule violation if;

The pet owner has failed to remove the pet or correct a pet rule violation within the time period specified; and

The pet rule violation is sufficient to begin procedures to terminate tenancy under terms of the lease.

### **DISCLAIMERS**

The SHA carries no insurance for pet owners with respect to any action by or to their pets.

The SHA reserves the right to create pet-free areas within any SHA property; in which event, a pet owner may be required to relocate to another dwelling unit.

### 15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit
[24 CFR Part 903.7 9 (p)]
<ul> <li>Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))?</li> <li>(If no, skip to component 17.)</li> </ul>
2. Yes No: Was the most recent fiscal audit submitted to HUD?
<ul> <li>3. Yes No: Were there any findings as the result of that audit?</li> <li>4. Yes No: If there were any findings, do any remain unresolved?</li> </ul>
If yes, how many unresolved findings remain?
5. Yes No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?
17. PHA Asset Management [24 CFR Part 903.7 9 (q)]
Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.
1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have <b>not</b> been addressed elsewhere in this PHA Plan?
<ul> <li>2. What types of asset management activities will the PHA undertake? (select all that apply)</li> <li>Not applicable</li> <li>Private management</li> </ul>
Development-based accounting
Private management  Development-based accounting  Comprehensive stock assessment  Other: (list below)
<ul> <li>Other: (list below)</li> <li>Yes ∑ No: Has the PHA included descriptions of asset management activities in the <b>optional</b></li> </ul>
Public Housing Asset Management Table?

### 18. Other Information [24 CFR Part 903.7 9 (r)]

A. Re	esident Advisory	Board Recommendations
1.		the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If y	es, the comments Attached at Atta Provided below:	
3. In	Considered com	the PHA address those comments? (select all that apply) aments, but determined that no changes to the PHA Plan were necessary. ed portions of the PHA Plan in response to comments ow:
	Other: (list below	w)
B. De	escription of Elec	ction process for Residents on the PHA Board
1.	Yes No:	Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to subcomponent C.)
2.	Yes No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)
3. De	scription of Resid	lent Election Process
a. Nor	Candidates were Candidates coul	dates for place on the ballot: (select all that apply) e nominated by resident and assisted family organizations d be nominated by any adult recipient of PHA assistance : Candidates registered with the PHA and requested a place on ballot )
b. Eli	Any head of hou Any adult recipi	(select one) EPHA assistance usehold receiving PHA assistance ent of PHA assistance oer of a resident or assisted family organization

<ul> <li>c. Eligible voters: (select all that apply)</li> <li>All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)</li> <li>Representatives of all PHA resident and assisted family organizations</li> <li>Other (list)</li> </ul>
C. Statement of Consistency with the Consolidated Plan For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Consolidated Plan jurisdiction: <b>State of North Carolina</b>
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
The PHA has participated in any consultation process organized and offered by the
Consolidated Plan agency in the development of the Consolidated Plan.  The PHA has consulted with the Consolidated Plan agency during the development of this PHA
Plan.  Activities to be undertaken by the PHA in the coming year are consistent with the initiatives
contained in the Consolidated Plan. (list below)  Other: (list below)
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)  SEE ATTACHMENT E
D. Other Information Required by HUD
Use this section to provide any additional information requested by HUD.
Definitions for a substantial deviation from a 5-Year Plan and a significant amendment or modification to a 5-Year Plan and Annual Plan:
Substantial deviations or significant amendments or modifications are defined as discretionary in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as required by HUD.

### **Attachments**

Use this section toprovide any additional attachments referenced in the Plans.

- A ADMISSIONS POLICY FOR DECONCENTRATION
- B FY 2005 CAPITAL FUND PROGRAM ANNUAL STATEMENT
- C FY 2005 CAPITAL FUND PROGRAM 5 YEAR ACTION PLAN
- **D-PHA CERTIFICATIONS & BOARD RESOLUTIONS**
- E STATEMENT OF CONSISTENCY WITH THE CONSOLIDATED PLAN.
- F FY2005 RHF ANNUAL STATEMENT
- G FY2004 CFP P & E REPORT
- H-FY2004 RHF P & E REPORT
- I FY2003 CFP P & E REPORT 50203
- J-FY2003 RHF P & E REPORT
- K FY2002 RHF P & E REPORT
- L FY 2001 RHF P & E REPORT
- M FY 2000 RHF P & E REPORT
- N-FY 1999 RHF P & E REPORT
- O STATEMENT OF COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT
- P COMMUNITY SERVICE POLICY
- **Q PROGRESS ON FY2000 MISSIONS & GOALS**
- R RESIDENT MEMBER ON THE PHA GOVERNING BOARD
- S MEMBERSHIP OF THE RESIDENT ADVISORY BOARD OR BOARDS
- T MANAGEMENT ORGANIZATIONAL CHART
- U VOLUNTARY CONVERSION INITIAL ASSESSMENTS
- V PROJECT BASED VOUCHER EXPLANATION
- W AMENDMENTS TO SECTION 8 ADMINISTRATIVE PLAN
- X SECTION 8 HOMEOWNERSHIP STATEMENT
- Y NEW PROJECT BASED ASSISTANCE SELECTION POLICY
- Z CAPITAL FUND GRANT LEVERAGING LOAN BUDGET

### ATTACHMENT A

### **Admissions Policy for Deconcentration**

### DECONCENTRATION POLICY

It is Sanford Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Towards this end, we will skip families on the waiting list to reach other families with a lower of higher income. We will accomplish this in a uniform and non-discriminating manner.

The Sanford Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement.

The Sanford Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.

Various incentives may be used at different times, or under different conditions, but will always be provided in a consistent and non-discriminatory manner.

When the Sanford Housing Authority discovers that a unit will become available, we will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or the income targeting goal.

The Sanford Housing Authority will contact the family first by telephone to make the unit offer. If the family cannot be reached by telephone, the family will be notified of a unit offer via first class mail. The family will be given three (3) business days from the date the letter was mailed to contact the Sanford Housing Authority regarding the offer.

The family will be offered the opportunity to view the unit. After the opportunity to view the unit, the family will have 24 hours to accept or reject the unit. This verbal offer and the family's decision must be documented in the tenant file. If the family rejects the offer of the unit, the Sanford Housing Authority will send the family a letter documenting the offer and the rejection.

### ATTACHMENT B-FY2005 ANNUAL STATEMENT

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
	: Sanford Housing Authority, Sanford, NC	Grant Type and Number			Federal FY of Grant:	
		Capital Fund Program Grant			2005	
		Replacement Housing Factor				
	ll Annual Statement Reserve for Disasters/ Emergenc					
	nance and Evaluation Report for Period Ending:	Final Performance and l	•		·	
Line No.	Summary by Development Account		mated Cost		al Actual Cost	
	To a company	Original	Revised	Obligated	Expended	
1	Total non-CFP Funds	Φ. <b></b>				
2	1406 Operations	\$65,802.00				
3	1408 Management Improvements	\$10,000.00				
4	1410 Administration	\$60,000.00				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$40,000.00				
8	1440 Site Acquisition					
9	1450 Site Improvement	\$50,000.00				
10	1460 Dwelling Structures	\$136,000.00				
11	1465.1 Dwelling Equipment—Nonexpendable	\$15,000.00				
12	1470 Nondwelling Structures	\$50,000.00				
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service	\$209,000.00				
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$635,802.00				
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security – Hard Costs					
26	Amount of line 21 Related to Energy Conservation Measures	\$8,000.00				

### Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: Sanford Ho	using Authority, Sanford, NC	Replacement Hou	gram Grant No: <b>N</b> Ising Factor Grant	No:		Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA-WIDE	Operations	1406	447 Units	\$65,802.00				
	SUBTOTAL			\$65,802.00				
	MANAGEMENT IMPROVEMENTS							
PHA-WIDE	Computer software& hardware	1408	LS	\$10,000.00				
	SUBTOTAL			\$10,000.00				
	ADMINISTRATION							
PHA-WIDE	a. Proration of salaries	1410	LS	\$40,000.00				
	Subtotal			\$40,000.00				
PHA-WIDE	b. Clerk of Works salary	1410	LS	\$20,000.00				
	Subtotal			\$20,000.00				
	SUBTOTAL			\$60,000.00				
	FEES &COSTS							
PHA-WIDE	a. Architects fee to prepare bid and contract	1430.1	447 Units	\$38,000.00				
	documents, drawings, specifications and							
	assist the PHA at bid opening, awarding							
	the contract, and to supervise the							
	construction work on a periodic basis.							
	Fee to be negotiated. Contract Labor.							
	Subtotal			\$38,000.00				
		1,420.2	445.11	#2.000.0C				
PHA-WIDE	b. Consulting fees for Agency Plan	1430.2	447 Units	\$2,000.00				
	preparation and annual updates.			#2 000 0C				
	Subtotal			\$2,000.00				
	SUBTOTAL			\$40,000.00				

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: Sanford Ho	using Authority, Sanford, NC	Grant Type and Capital Fund Pro Replacement Hou	gram Grant No: <b>N</b>			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	SITE IMPROVEMENTS							
NC035-3	Re-sealing & paving	1450	LS	\$20,000.00				
NC035-6		1450	LS	\$20,000.00				
NC035-7		1450	LS	\$10,000.00				
	Subtotal			\$50,000.00				
	DWELLING STRUCTURES							
NC035-6	a. Gutters & downspouts	1460	55 Units	\$32,000.00				
	Subtotal			\$32,000.00				
NC035-4	b. Kitchen cabinets (Phase I)	1460	40 Units	\$88,000.00				
	Subtotal			\$88,000.00				
PHA-Wide	c. Replace Water Heaters	1460	16 Units	\$8,000.00				
	Subtotal			\$8,000.00				
NC035-4	d. Replace wall HVAC units as necessary	1460	10 Units	\$8,000.00		+		
	Subtotal	- 1.00		\$8,000.00				
	SUBTOTAL			\$136,000.00				
	DWELLING EQUIPMENT NON-EXPENDABLE							
PHA-Wide	a. Replace ranges & refrigerators	1465.1	15 Units	\$15,000.00				
	SUBTOTAL			\$15,000.00				
	NON-DWELLING STRUCTURES							1
PHA-WIDE	Repay building CP&L	1470	LS	\$50,000.00				
	SUBTOTAL			\$50,000.00				
	CALLATERIZATION OR DEBT SERVICE							1
PHA-WIDE	Repayment of Fannie Mae Loan	1501	LS	\$209,000.00				
	SUBTOTAL			\$209,000.00				
	GRAND TOTAL			\$635,802.00				

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Sanford Housing Sanford, NC	Capit		umber ram No: NC19P03 ing Factor No:	3550105	Federal FY of Grant: 2005		
Development Number	All	l Fund Obligate	ed	A	ll Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide Activities		arter Ending Da	ate)		uarter Ending Date	)	
	Original	Revised	Actual	Original	Revised	Actual	
PHA-WIDE	9/13/07			9/13/09			
NC35-1	9/13/07			9/13/09			
NC35-2	9/13/07			9/13/09			
NC35-3	9/13/07			9/13/09			
NC35-4	9/13/07			9/13/09			
NC35-5	9/13/07			9/13/09			
NC35-6	9/13/07			9/13/09			
NC35-7	9/13/07			9/13/09			

NC35-1=120 Apts.

NC35-2=50 Apts.

NC35-3=57 Apts.

NC35-4=100 Apts.

NC35-5=25 Apts.

NC35-6=55 Apts.

NC35-7=40 Apts.

Total=447 Apts.

### ATTACHMENT C-FY2005 CFP 5 YEAR ACTION PLAN

Capital Fund Pa	rogram F	ive-Year Action Plan			
Part I: Summar	<b>'y</b>				
PHA Name: Sanford Ho				☑Original 5-Year Plan	
Authority, Sanford, NC				☐Revision No:	
Development	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
Number/Name/HA-		FFY Grant: 2006	FFY Grant: 2007	FFY Grant: 2008	FFY Grant: 2009
Wide		PHA FY: 2006	PHA FY: 2007	PHA FY: 2008	PHA FY: 2009
HA WIDE		\$557,802.00	\$549,802.00	\$469,802.00	\$474,802.00
	Annual				
	Statement				
NC35-1		\$25,000.00	\$25,000.00	\$25,000.00	\$101,000.00
NC35-2		\$0.00	\$0.00	\$50,000.00	\$0.00
NC35-3		\$0.00	\$48,000.00	\$0.00	\$0.00
NC35-4		\$53,000.00	\$13,000.00	\$0.00	\$20,000.00
NC35-5		\$0.00	\$0.00	\$0.00	\$20,000.00
NC35-6		\$0.00	\$0.00	\$91,000.00	\$0.00
NC35-7		\$0.00	\$0.00	\$0.00	\$20,000.00
CFP Funds Listed for		\$635,802.00	\$635,802.00	\$635,802.00	\$635,802.00
5-year planning					
Replacement Housing Factor Funds		\$33,890.00	\$33,890.00	\$33,890.00	\$33,890.00

Part II: S	<b>Supporting Pages</b>	— Work Activities				
Activities		Activities for Year: 2			Activities for Year: 3	
for		FFY Grant: 2006			FFY Grant: 2007	
Year 1		PHA FY: 2006			PHA FY: 2007	
	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>
See	PHA-WIDE	Operations	\$65,802.00	PHA-WIDE	Operations	\$65,802.00
	PHA-WIDE	Management Improvements	\$10,000.00	PHA-WIDE	Management Improvements	\$10,000.00
Annual	PHA-WIDE	Fees & Costs	\$40,000.00	PHA-WIDE	Fees & Costs	\$40,000.00
Statement	PHA-WIDE	Dwelling Equipment		PHA-WIDE	Dwelling Equipment	
		Range & Refrigerator	\$15,000.00		Range & Refrigerator	\$15,000.00
	PHA-WIDE	Administration	\$60,000.00	PHA-WIDE	Administration	\$60,000.00
	PHA-WIDE	1501-Fannie Mae Loan	\$209,000.00	PHA-WIDE	1501-Fannie Mae Loan	\$209,000.00
	PHA-WIDE	Roofing	\$25,000.00	PHA-WIDE	Convert Master Gas & Water	\$100,000.00
	PHA-WIDE	Electrical Wiring	\$25,000.00		Systems to Retail (Phase I)	
	PHA-WIDE	Replace Retaining Walls	\$25,000.00	PHA-WIDE	Non-Dwelling Construction	
	PHA-WIDE	Replace Flooring	\$25,000.00		Renovate Community Spaces	\$20,000.00
	PHA-WIDE	Resurface Parking Areas	\$25,000.00	PHA-WIDE	Non-Dwelling Equipment	
	PHA-WIDE	Upgrade Stoops & Sidewalks	\$25,000.00		Vehicle	\$25,000.00
	PHA-WIDE	Housing Inspections	\$8,000.00	PHA-WIDE	Replace Kitchen Cabinets	\$5,000.00
		SUBTOTAL	\$557,802.00		SUBTOTAL	\$549,802.00
	NC35-1A & B	Complete Renovation	\$25,000.00	NC35-1A & B	Complete Renovation	\$25,000.00
		Phase IV			Phase V	
		SUBTOTAL	\$25,000.00		SUBTOTAL	\$25,000.00
	NC35-4	Kitchen Cabinets (Phase II)	\$53,000.00	NC35-3	Paving, Sidewalks, Drainage,	\$48,000.00
		SUBTOTAL	\$53,000.00		Grading, Landscaping	
					SUBTOTAL	\$48,000.00
				NC35-4	Replace Wall HVAC Units	\$13,000.00
					as necessary	
					SUBTOTAL	\$13,000.00
	Total CFP Estim	ated Cost	\$635,802.00			\$635,802.00

### Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

Activities for Year: 4

FFY Grant: 2008

PHA FY: 2008

PHA FY: 2009

PHA FY: 2009

	PHA FY: 2008		PHA FY: 2009				
Development	Major Work Categories	<b>Estimated Cost</b>	Development	Major Work Categories	<b>Estimated Cost</b>		
Name/Number			Name/Number				
PHA-WIDE	Operations	\$65,802.00	PHA-WIDE	Operations	\$65,802.00		
PHA-WIDE	Management Improvements	\$10,000.00	PHA-WIDE	Management Improvements	\$10,000.00		
PHA-WIDE	Fees & Costs	\$40,000.00	PHA-WIDE	Fees & Costs	\$40,000.00		
PHA-WIDE	Dwelling Equipment		PHA-WIDE	Dwelling Equipment			
	Range & Refrigerator	\$15,000.00		Range & Refrigerator	\$15,000.00		
PHA-WIDE	Administration	\$60,000.00	PHA-WIDE	Administration	\$60,000.00		
PHA-WIDE	1501-Fannie Mae Loan	\$209,000.00	PHA-WIDE	1501-Fannie Mae Loan	\$209,000.00		
PHA-WIDE	Convert Master Gas & Water	\$50,000.00	PHA-WIDE	Non-Dwelling Construction			
	Systems to Retail (Phase II)			AMC Spaces	\$20,000.00		
PHA-WIDE	Non-Dwelling Construction		PHA-WIDE	Non-Dwelling Equipment			
	Renovate Community Spaces	\$20,000.00		Copier	\$15,000.00		
	SUBTOTAL	\$469,802.00	PHA-WIDE	<u>Demolition</u>			
				Determine Need	\$20,000.00		
NC35-1A & B	Complete Renovation	\$25,000.00	PHA-WIDE	Development Activities			
	Phase VI			Determine Feasibility	\$20,000.00		
	SUBTOTAL	\$25,000.00		SUBTOTAL	\$474,802.00		
			NC35-1A & B	Complete Renovation	\$101,000.00		
NC35-2	Paving, Grading, Landscaping,			Phase VII (Bond Issue)			
	Utilities & Drainage (Phase II)	\$50,000.00		SUBTOTAL	\$101,000.00		
	SUBTOTAL	\$50,000.00	NC35-4	Walls, Ceilings, Floors, & Doors	\$20,000.00		
				SUBTOTAL	\$20,000.00		
NC35-6	Walls, Ceilings, Floors & Doors	\$91,000.00	NC35-5	Walls, Ceilings, Floors, & Doors	\$20,000.00		
	SUBTOTAL	\$91,000.00		SUBTOTAL	\$20,000.00		
			NC35-7	Walls, Ceilings, Floors, & Doors	\$20,000.00		
				SUBTOTAL	\$20,000.00		
					•		
Total CE	D Estimated Cost	\$635,802.00			\$635,802.00		
Total CF	P Estimated Cost	φυ <b>35,0υ2.</b> υυ			φυ35,0υ2.υυ		

### ATTACHMENT D

### **PHA Certifications and Board Resolutions**

Originals forwarded to local HUD office under separate cover.

### ATTACHMENT E

Statement of Consistency with the Consolidated Plan.

Originals forwarded to local HUD office under separate cover.

### **Public Housing Drug Elimination Program Plan**

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions

located in applicable PIH Notices.	,	1	
Annual PHDEP Plan Table of Contents:  1. General Information/History  2. PHDEP Plan Goals/Budget  3. Milestones			
4. Certifications			
Section 1: General Information/History			
A. Amount of PHDEP Grant §			
B. Eligibility type (Indicate with an "x")	N1 I	N2 R	_
C. FFY in which funding is requested			
<b>D.</b> Executive Summary of Annual PHDEP II In the space below, provide a brief overview of the PHDI		ahta of major initiatives or	activities undentalian. It may
include a description of the expected outcomes. The sum			
E. Target Areas Complete the following table by indicating each PHDEP number of units in each PHDEP Target Area, and the total each Target Area.			
PHDEP Target Areas (Name of development(s) or site)	Total # of Units withi the PHDEP Target Area(s)	1	
			-
			-
<b>F. Duration of Program</b> Indicate the duration (number of months funds will be recthe length of program by # of months. For "Other", iden	<b>.</b> .	ogram proposed under this	Plan (place an "x" to indicate

6 Months\_\_\_\_ 12 Months\_\_\_ 18 Months\_\_\_ 24 Months\_\_\_ Other \_\_\_

### **G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs <a href="have not">have not</a> been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date

### Section 2: PHDEP Plan Goals and Budget

### A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

### **B. PHDEP Budget Summary**

Enter the total amount of PHDEP funding allocated to each line item.

FY PHDEP Budget Summary							
Budget Line Item	Total Funding						
9110 - Reimbursement of Law Enforcement							
9120 - Security Personnel							
9130 - Employment of Investigators							
9140 - Voluntary Tenant Patrol							
9150 - Physical Improvements							
9160 - Drug Prevention							
9170 – Drug Intervention							
9180 – Drug Treatment							
9190 – Other Program Costs							
TOTAL PHDEP FUNDING							

### **PHDEP Plan Goals and Activities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement				Total PHDEP Funding: \$			
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel				Total PHDEP Funding: \$			
Goal(s)					•		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							·

9130 - Employment of Investigators				Total PHDEP Funding: \$			
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

7 - 10					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9150 - Physical Improvements					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

7200 2100 2100						Total PHDEP Funding: \$			
Goal(s)									
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

7					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								

9190 - Other Program Costs					Total PHDEP Funds: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

### **Section 3: Expenditure/Obligation Milestones**

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

<b>Budget Line</b>	25% Expenditure	Total PHDEP	50% Obligation	Total PHDEP
Item #	of Total Grant	Funding	of Total Grant	Funding
	Funds By Activity	Expended (sum of	Funds by Activity	Obligated (sum of
	#	the activities)	#	the activities)
e.g Budget Line	Activities 1, 3		Activity 2	
Item # 9120				
9110				
9120				
9130				
9140				
9150				
9160				
9170				
9180				
9190				
TOTAL				

### **Section 4: Certifications**

### ATTACHMENT F-FY2005 RHF ANNUAL STATEMENT

	ual Statement/Performance and Evaluation	-		CED/CEDDIJE) D	AT G
	ital Fund Program and Capital Fund P		ent Housing Factor (	CFP/CFPRHF) Par	
PHA N	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number	N		Federal FY of Grant:
		Capital Fund Program Grant			2005
Mori	-:		Grant No: NC19R03550105	`	
	ginal Annual Statement Reserve for Disasters/ Emer formance and Evaluation Report for Period Ending:		and Evaluation Report	)	
Line	Summary by Development Account		mated Cost	Total A	ctual Cost
No.	Summary by Development Account	Total Esti	illiated Cost	Total A	ctual Cost
110.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	- 5		<b>G</b>	1
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	\$33,890.00			
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$33,890.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

### Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement House

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

	ord Housing Authority, Sanford, NC	Grant Type and Capital Fund Pro	Number ogram Grant No:			Federal FY of Grant: 2005		
		Replacement Ho	ousing Factor Grant	No: NC19R035	50105			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct Quantity To			Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended	
	DEVELOPMENT ACTIVITIES							
NC35-3	Replacement Housing	1499	5 Units	\$33.890.00				
	SUBTOTAL			\$33,890.00				
	GRAND TOTAL			\$33,890.00				

Annual Statement	t/Performa	ance and	Evaluatio	n Report			
<b>Capital Fund Pro</b>	gram and	Capital H	<b>Sund Prog</b>	gram Replac	ement Housi	ng Factor	(CFP/CFPRHF)
Part III: Implem	entation S	chedule		_			
PHA Name: Sanford Hot Sanford, NC	·		Type and Nurtal Fund Progra		19R03550105	Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities  All Fund Obligated (Quarter Ending Date)			ted	A	Il Funds Expended uarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NC35-3	09/30/08			12/30/09			

NC35-1=120 apts. NC35-2=50 apts. NC35-3=57 apts. NC35-4=100 apts. NC35-5=25 apts. NC35-6=55 apts. NC35-7=40 apts.

### ATTACHMENT G-FY2004 CFP P & E REPORT

Annual	<b>Statement/Performance and Evaluatio</b>	n Report			
Capital	<b>Fund Program and Capital Fund Prog</b>	ram Replacement H	Housing Factor (CF)	P/CFPRHF) Part	I: Summary
PHA Name	: Sanford Housing Authority, Sanford, NC	Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant I			2004
		Replacement Housing Factor			
	l Annual Statement Reserve for Disasters/ Emergence				
Line No.	nance and Evaluation Report for Period Ending: 3/31/0 Summary by Development Account		mated Cost	Total A	ctual Cost
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total non-CFP Funds	Original	Revised	Obligated	Expended
2	1406 Operations	\$66,000.00	\$86,000.00	\$6,194.00	\$4,014.00
	1	' /	. /		. /
3	1408 Management Improvements	\$15,000.00	\$15,000.00	\$3,300.00	\$698.00
4	1410 Administration	\$68,000.00	\$68,000.00	\$68,000.00	\$6,359.00
5	1411 Audit				
6	1415 Liquidated Damages	***		4	
7	1430 Fees and Costs	\$26,000.00	\$26,000.00	\$26,000.00	\$0.00
8	1440 Site Acquisition				***********
9	1450 Site Improvement	\$35,500.00	\$35,500.00	\$23,018.00	\$23,018.00
10	1460 Dwelling Structures	\$345,302.00	\$345,302.00	\$336,518.00	\$279,023.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$10,000.00	\$10,000.00	\$9,078.00	\$9,078.00
12	1470 Nondwelling Structures	\$50,000.00	\$50,000.00	\$50,000.00	\$9,720.00
13	1475 Nondwelling Equipment	\$20,000.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$635,802.00	\$635,802.00	\$522,108.00	\$331,910.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs	\$301,727.00	\$299,205.00	\$299,205.00	\$269,285.00
26	Amount of line 21 Related to Energy	, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	. ,	,

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/05

PHA Name: Sanford	Housing Authority, Sanford, NC			NC19P03550104 ant No:		Federal FY of	Grant: 2004	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Ac	tual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA-WIDE Oper	Operations	1406	447 Units	\$66,000.00	\$86,000.00	\$6,194.00	\$4,014.00	In Pro
	SUBTOTAL			\$66,000.00	\$86,000.00	\$6,194.00	\$4,014.00	
	MANAGEMENT IMPROVEMENTS							
PHA-WIDE	Management Improvements	1408	447 Units	\$15,000.00	\$15,000.00	\$3,300.00	\$698.00	In Pro
	SUBTOTAL			\$15,000.00	\$15,000.00	\$3,300.00	\$698.00	
	<u>ADMINISTRATION</u>							
PHA-WIDE	Administration	1410	447 Units	\$68,000.00	\$68,000.00	\$68,000.00	\$6,359.00	In Pro
	SUBTOTAL			\$68,000.00	\$68,000.00	\$68,000.00	\$6,359.00	
	FEES &COSTS							+
PHA-WIDE	a. Architects fee to prepare bid and contract	1430.1	447 Units	\$23,000.00	\$23,000.00	\$23,000.00	\$0.00	In Pro
	documents, drawings, specifications and							
	assist the PHA at bid opening, awarding							
	the contract, and to supervise the							
	construction work on a periodic basis.							
	Fee to be negotiated. Contract Labor.							
	Subtotal			\$23,000.00	\$23,000.00	\$23,000.00	\$0.00	
PHA-WIDE	b. Consulting fees for Agency Plan	1430.2	447 Units	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	In Pro
	preparation and Annual updates.							
	Subtotal			\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	
	SUBTOTAL			\$26,000.00	\$26,000.00	\$26,000.00	\$0.00	

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/05

	Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant No: NC19P03550104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	SITE IMPROVEMENTS							
Nc035-3	a. Emergency repairs at water distribution	1450	LS	\$35,500.00	\$23,018.00	\$23,018.00	\$23,018.00	Added
	System.							Emer
								Comp
PHA Wide	b. Add landscaping, trees & drainage for	1450	PHA-Wide	\$0.00	\$12,482.00	\$0.00	\$0.00	Adde
	Sidewalk repair w/fung. from 2005 in the							
	2004 5-yr. Action Plan.							
	SUBTOTAL			\$35,500.00	\$35,500.00	\$23,018.00	\$23,018.00	
	DWELLING STRUCTURES							
NC035-1B	a. New windows & Screens	1460	70 Units	\$301,727.00	\$299,205.00	\$299,205.00	\$269,285.00	In Pro
	Subtotal			\$301,727.00	\$299,205.00	\$299,205.00	\$269,285.00	
NC035-4	b. Replace Roof @ 1 Bldg.	1460	1 Unit	\$32,575.00	\$27,575.00	\$27,575.00	\$0.00	In Pro
	Subtotal			\$32,575.00	\$27,575.00	\$27,575.00	\$0.00	
PHA Wide	c. Replace Water Heaters	1460	20 Units	\$9,428.00	\$4,780.00	\$1,160.00	\$1,160.00	In
	Subtotal	2.00		\$9,428.00	\$4,780.00	\$1,160.00	\$1,160.00	Prog
NC035-4	d. Replace Wall HVAC Units as necessary	1460	10 Units	\$0.00	\$7,170.00	\$2,006.00	\$2,006.00	Adde
INCUSS-4	Subtotal	1400	10 Cints	\$0.00	\$7,170.00	\$2,006.00	\$2,006.00	Bacl
	Subtotal			φυ.υυ	\$7,170.00	φ2,000.00	\$2,000.00	Daci

# Annual Statement/Performance and Evaluation Report Budget Revision #2 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/05

PHA Name: Sanford Housing Authority, Sanford, NC		Grant Type and Number Capital Fund Program Grant No: NC19P03550104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NC035-1A&B	e. Add "test kitchen cabinets" in 2 units w/	1460	2 Units	\$6,572.00	\$6,572.00	\$6,572.00	\$6,572.00	Added
	Fungibility from 2005 in the 2004 5-yr.							
	Action Plan for the complete renovation							
	of GA035-1A&B.							
	Subtotal			\$6,572.00	\$6,572.00	\$6,572.00	\$6,572.00	
	SUBTOTAL			\$345,302.00	\$345,302.00	\$336,518.00	\$279,023.00	
	DWELLING EQUIPMENT NON-EXPENDABLE							
PHA-Wide	a. Replace ranges & refrigerators	1465.1	15 Units	\$10,000.00	\$10,000.00	\$9,078.00	\$9,078.00	Comp.
	SUBTOTAL			\$10,000.00	\$10,000.00	\$9,078.00	\$9,078.00	
	NON-DWELLING STRUCTURES							
PHA-WIDE	Renovate existing AMC spaces/purchase	1470	1	\$50,000.00	\$50,000.00	\$50,000.00	\$9,720.00	In Prog
	new Facility Phase IV							
	SUBTOTAL			\$50,000.00	\$50,000.00	\$50,000.00	\$9,720.00	
	NON-DWELLING EQUIPMENT							
PHA-WIDE	Purchase 1 New Truck	1475	LS	\$20,000.00	\$0.00	\$0.00	\$0.00	Delete
	SUBTOTAL			\$20,000.00	\$0.00	\$0.00	\$0.00	
	GRAND TOTAL			\$635,802.00	\$635,802.00	\$522,108.00	\$331,910.00	

#### **Annual Statement/Performance and Evaluation Report Budget Revision #2** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/05 **Part III: Implementation Schedule** PHA Name: Sanford Housing Authority, **Grant Type and Number** Federal FY of Grant: 2004 Capital Fund Program No: NC19P03550104 Sanford, NC Replacement Housing Factor No: All Fund Obligated All Funds Expended Development Number Reasons for Revised Target Dates Name/HA-Wide Activities (Quarter Ending Date) (Quarter Ending Date) Original Revised Original Revised Actual Actual 9/13/06 9/13/08 **PHA-WIDE** NC35-1 9/13/06 9/13/08 NC35-2 9/13/06 9/13/08 NC35-3 9/13/06 9/13/08 NC35-4 9/13/06 9/13/08 NC35-5 9/13/06 9/13/08 NC35-6 9/13/06 9/13/08 NC35-7 9/13/06 9/13/08

NC35-1=120 Apts.

NC35-2=50 Apts.

NC35-3=57 Apts.

NC35-4=100 Apts.

NC35-5=25 Apts.

NC35-6=55 Apts.

NC35-7=40 Apts.

Total=447 Apts.

## ATTACHMENT H-FY2004 RHF P & E REPORT

Annual Statement/Performance and Evaluation Report											
Capi	ital Fund Program and Capital Fund P	rogram Replaceme	nt Housing Factor (C	<b>CFP/CFPRHF)</b> Par	t I: Summary						
	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant		,	Federal FY of Grant: 2004						
	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Revised Annual	<b>Statement (revision no: )</b>	*ACTUAL FUNDING							
	formance and Evaluation Report for Period Ending: 3		nce and Evaluation Report	AVAILABLE FROM							
Line No.	Summary by Development Account	Total Esti	mated Cost	Total Ac	tual Cost						
1101		Original	Revised	Obligated	Expended						
1	Total non-CFP Funds				•						
2	1406 Operations										
3	1408 Management Improvements										
4	1410 Administration										
5	1411 Audit										
6	1415 Liquidated Damages										
7	1430 Fees and Costs										
8	1440 Site Acquisition										
9	1450 Site Improvement										
10	1460 Dwelling Structures										
11	1465.1 Dwelling Equipment—Nonexpendable										
12	1470 Nondwelling Structures										
13	1475 Nondwelling Equipment										
14	1485 Demolition										
15	1490 Replacement Reserve										
16	1492 Moving to Work Demonstration										
17	1495.1 Relocation Costs										
18	1499 Development Activities	\$33,890.00 *		\$0.00	\$0.00						
19	1501 Collaterization or Debt Service										
20	1502 Contingency										
21	Amount of Annual Grant: (sum of lines $2-20$ )	\$33,890.00 *		\$0.00	\$0.00						
22	Amount of line 21 Related to LBP Activities										
23	Amount of line 21 Related to Section 504 compliance										
24	Amount of line 21 Related to Security – Soft Costs										
25	Amount of Line 21 Related to Security – Hard Costs										
26	Amount of line 21 Related to Energy Conservation										
	Measures										

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part II: Supporting Pages

	Grant: 2004	Federal FY of G	50104	No: <b>NC19R035</b>	gram Grant No:	Grant Type and Capital Fund Pro Replacement Ho	PHA Name: Sanford Housing Authority, Sanford, NC				
Status of Work	tual Cost	Total Act		Total Estin	Quantity	Dev. Acct No.	General Description of Major Work Categories	Development Number Name/HA-Wide Activities			
	Funds Expended	Funds Obligated	Revised	Original							
							DEVELOPMENT ACTIVITIES				
Actual	\$0.00	\$0.00		\$33,890.00 *	5 Units	1499	Replacement Housing	NC35-3			
Funding											
Amount not	\$0.00	\$0.00		\$33,890.00 *			SUBTOTAL				
Available											
From HUD	\$0.00	\$0.00		\$33,890.00 *			GRAND TOTAL				
As of											
3/31/05.											
	\$0.00	φυ.υυ		\$33,090.00 *			GRAND TOTAL				

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part III: Implementation Schedule PHA Name: Sanford Housing Authority. Sanford, NC Grant Type and Number Capital Fund Program No: Federal FY of Grant: 2004

Sanford, NC	Capit	al Fund Progra	m No:		7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
,		Repla	cement Housin	ng Factor No: NC1	19R03550104		
Development Number	All	Fund Obligat	ed		Il Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide	arter Ending D	ate)	(Q	uarter Ending Date	e)		
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
NC35-3	09/13/06			9/13/08			Actual funding amount not available from HUD as of
							3/31/05. Implementation dates here are per HA.

NC35-1=120 apts.

NC35-2=50 apts.

NC35-3=57 apts.

NC35-4=100 apts.

NC35-5=25 apts.

NC35-6=55 apts.

NC35-7=40 apts.

## ATTACHMENT I-FY2003 CFP P & E REPORT 50203

	ual Statement/Performance and Evalua	-	4 H . T . (6	(ED/CEDDIIE) D	4.T. G			
_	ital Fund Program and Capital Fund Pame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N	Grant Type and Number Capital Fund Program Grant No: NC19P03550203 Replacement Housing Factor Grant No:					
	ginal Annual Statement Reserve for Disasters/ Emer	gencies Revised Annual S	Statement (revision no: 2)					
Line	formance and Evaluation Report for Period Ending: 3/ Summary by Development Account		ce and Evaluation Report nated Cost	Total	Actual Cost			
No.		2 0002 2502		2000	2000			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	\$24,174.00	\$24,174.00	\$24,174.00	\$24,174.00			
3	1408 Management Improvements							
4	1410 Administration	\$12,087.00	\$12,087.00	\$12,087.00	\$12,087.00			
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	\$84,613.00	\$84,613.00	\$79,879.00	\$57,585.00			
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures							
13	1475 Nondwelling Equipment							
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$120,874.00	\$120,874.00	\$116,140.00	\$93,846.00			
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504 compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard Costs							
26	Amount of line 21 Related to Energy Conservation							
L	Measures							

## Annual Statement/Performance and Evaluation Report Budget Revision #2 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

3/31/05

Part II: Supporting Pages

PHA Name: Sanford	Housing Authority, Sanford, NC		Number gram Grant No: No using Factor Grant	No:	Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Ac	tual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA-WIDE	Operations	1406	447 Units	\$24,174.00	\$24,174.00	\$24,174.00	\$24,174.00	Completed
	SUBTOTAL			\$24,174.00	\$24,174.00	\$24,174.00	\$24,174.00	
	<u>ADMINISTRATION</u>							
PHA-WIDE	Administration	1410	447 Units	\$12,087.00	\$12,087.00	\$12,087.00	\$12,087.00	Completed
	SUBTOTAL			\$12,087.00	\$12,087.00	\$12,087.00	\$12,087.00	
	DWELLING STRUCTURES							
NC35-1	a. Complete renovation of 10 Units	1460	10 Units	\$0.00	\$2,900.00	\$2,900.00	\$2,900.00	Added tile
	@ 1A & B (Phase II)							Work back
	Subtotal			\$0.00	\$2,900.00	\$2,900.00	\$2,900.00	Comp.
NC35-1B	b. Replace HVAC systems Phase III	1460	70 Units	\$83,000.00	\$68,560.0	\$68,560.00	\$57,585.00	Added
	(w/ fungibility from 2002)							In Progres
	Subtotal			\$83,000.00	\$68,560.00	\$68,560.00	\$57,585.00	
NC35-1B	c. Replace water heaters (Broken down	1460	8 Units	\$1,613.00	\$1,743.00	\$1,743.00	\$1,743.00	Added/
	from complete renovation work item)							Completed
	Subtotal			\$1,613.00	\$1,743.00	\$1,743.00	\$1,743.00	
NC35-4	d. Add re-roofing @ Stewart Manor w/ Fungibility from 2004.	1460	1 Bldg.	\$0.00	\$11,410.00	\$6,676.00	\$0.00	Added
	Subtotal			\$0.00	\$11,410.00	\$6,676.00	\$0.00	
	SUBTOTAL			\$84,613.00	\$84,613.00	\$79,879.00	\$57,585.00	
	GRAND TOTAL			\$120,874.00	\$120,874.00	\$116,140.00	\$93,846.00	

<b>Annual Statement</b>	/Performa	<b>Budget Revision #2</b>					
<b>Capital Fund Prog</b>	gram and (	Capital F	und Prog	ram Replace	ement Housi	ng Factor	(CFP/CFPRHF) 3/31/05
Part III: Impleme	entation Sc	hedule					
PHA Name: Sanford Hou Sanford, NC	Capi		umber ram No: NC19P0: sing Factor No:	3550203	Federal FY of Grant: 2003		
			d Obligated Ending Date)  All Funds Expended (Quarter Ending Date)				Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NC35-1	02/13/06			02/13/08			
NC35-4	N/A	02/13/06		N/A	02/13/08		Added work item at NC35-4 w/fungibility.

NC35-1=120 Apts. NC35-2=50 Apts.

NC35-3=57 Apts. NC35-4=100 Apts. NC35-5=25 Apts. NC35-6=55 Apts. NC35-7=40 Apts. Total=447 Apts.

## ATTACHMENT J-FY2003 RHF P & E REPORT

Ann	ual Statement/Performance and Evaluation	ation Report			
Cap	ital Fund Program and Capital Fund P	rogram Replacemei	nt Housing Factor (	CFP/CFPRHF) Pa	art I: Summary
PHA N	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N Replacement Housing Factor 0	Federal FY of Grant: 2003		
	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Revised Annual	Statement (revision no:	)	<b>'</b>
	formance and Evaluation Report for Period Ending: 3		nce and Evaluation Report	1	
Line	Summary by Development Account	Total Estin	nated Cost	Total A	Actual Cost
No.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	Original	Tevised	Obligated	Zapenaca
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	\$28,961.00		\$0.00	\$0.00
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$28,961.00		\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				
	Measures				

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part II: Supporting Pages

PHA Name: Sanfo	rd Housing Authority, Sanford, NC	_	Number ogram Grant No: ousing Factor Grant	No: <b>NC19R035</b>	Federal FY of G	Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	DEVELOPMENT ACTIVITIES							
NC35-3	Replacement Housing	1499	5 Units	\$28,961.00		\$0.00	\$0.00	No Work
	SUBTOTAL			\$28,961.00		\$0.00	\$0.00	To date
	GRAND TOTAL			\$28,961.00		\$0.00	\$0.00	

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part III: Implementation Schedule PHA Name: Sanford Housing Authority. Grant Type and Number Federal FY of Grant: 2003

ising Authority	Capita	al Fund Progra	m No:	9R03550103	Federal FY of Grant: 2003	
ne/HA-Wide (Quarter E Activities			Obligated All Funds Exper			Reasons for Revised Target Dates
Original Revised Actual Original Revised Actual						
09/30/08			12/30/09	9/30/2010		PHA has submitted a development proposal to HUD.  Change expended date to match LOCC's.
	All I (Quar Original	Capita Repla All Fund Obligate (Quarter Ending Date Original Revised	Capital Fund Progra Replacement Housin All Fund Obligated (Quarter Ending Date)  Original Revised Actual	Capital Fund Program No: Replacement Housing Factor No: NC1 All Fund Obligated A (Quarter Ending Date) (Quarter Ending Date) Original Revised Actual Original	Capital Fund Program No: Replacement Housing Factor No: NC19R03550103  All Fund Obligated (Quarter Ending Date)  Original Revised Actual Original Revised	Capital Fund Program No: Replacement Housing Factor No: NC19R03550103  All Fund Obligated (Quarter Ending Date)  Original Revised Actual Original Revised Actual

NC35-1=120 apts.

NC35-2=50 apts.

NC35-3=57 apts.

NC35-4=100 apts.

NC35-5=25 apts.

NC35-6=55 apts.

NC35-7=40 apts.

## ATTACHMENT K-FY2002 RHF P & E REPORT

Ann	ual Statement/Performance and Evalua	ation Report							
Cap	ital Fund Program and Capital Fund P	rogram Replacemen	nt Housing Factor (	CFP/CFPRHF) Pai	t I: Summary				
	Jame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R03550102						
Ori	ginal Annual Statement Reserve for Disasters/ Emer			)					
	formance and Evaluation Report for Period Ending: 3.		nce and Evaluation Report	,					
Line	Summary by Development Account		mated Cost	Total Ac	ctual Cost				
No.									
		Original	Revised	Obligated	Expended				
1	Total non-CFP Funds								
2	1406 Operations								
3	1408 Management Improvements								
4	1410 Administration								
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs								
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures								
11	1465.1 Dwelling Equipment—Nonexpendable								
12	1470 Nondwelling Structures								
13	1475 Nondwelling Equipment								
14	1485 Demolition								
15	1490 Replacement Reserve								
16	1492 Moving to Work Demonstration								
17	1495.1 Relocation Costs								
18	1499 Development Activities	\$36,487.00		\$0.00	\$0.00				
19	1501 Collaterization or Debt Service								
20	1502 Contingency								
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$36,487.00		\$0.00	\$0.00				
22	Amount of line 21 Related to LBP Activities								
23	Amount of line 21 Related to Section 504 compliance								
24	Amount of line 21 Related to Security – Soft Costs								
25	Amount of Line 21 Related to Security – Hard Costs								
26	Amount of line 21 Related to Energy Conservation								
	Measures								

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part II: Supporting Pages

PHA Name: Sanfo	rd Housing Authority, Sanford, NC	Grant Type and Capital Fund Pro		Federal FY of (	Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin		Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	DEVELOPMENT ACTIVITIES							
NC35-3	Replacement Housing	1499	5 Units	\$36,487.00		\$0.00	\$0.00	No Work
	SUBTOTAL			\$36,487.00		\$0.00	\$0.00	To date
	GRAND TOTAL			\$36,487.00		\$0.00	\$0.00	

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part III: Implementation Schedule

_	HA Name: Sanford Housing Authority. Grant Type and Number Federal FY of Grant: 2002										
	ising Authorit	y. Grani	tal Fund Progra				rederal FY of Grant: 2002				
Sanford, NC		_		ng Factor No: <b>NC</b> 1	0D03550102						
D 1 (N 1	5 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Ť			D C D : 1 T ( D )				
Development Number		Fund Obliga			ll Funds Expended		Reasons for Revised Target Dates				
Name/HA-Wide	(Qua	rter Ending D	ate)	(Q	uarter Ending Date	e)					
Activities											
	Original	Revised	Actual	Original	Revised	Actual					
NC35-3	09/30/07			09/30/09			PHA has submitted a development Proposal to HUD.				
							Need maximum time frame for expenditure of funds				
							From obligation end date of 09/30/07.				

NC35-1=120 apts.

NC35-2=50 apts.

NC35-3=57 apts.

NC35-4=100 apts.

NC35-5=25 apts.

NC35-6=55 apts.

NC35-7=40 apts.

## ATTACHMENT L-FY2001 RHF P & E REPORT

Ann	ual Statement/Performance and Evalua	ation Report			
Cap	ital Fund Program and Capital Fund P	rogram Replacemer	nt Housing Factor (	CFP/CFPRHF) Pa	rt I: Summary
PHA N	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N			Federal FY of Grant: 2001
	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Revised Annual S	Statement (revision no:	)	
	formance and Evaluation Report for Period Ending: 3		ce and Evaluation Report	m . 1	
Line No.	Summary by Development Account	Total Estin	nated Cost	Total A	Actual Cost
110.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	9		8	•
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	\$37,001.00		\$0.00	\$0.00
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$37,001.00		\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				
	Measures				

## **Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

3/31/05

**Part II: Supporting Pages** 

PHA Name: Sanfo	rd Housing Authority, Sanford, NC		ogram Grant No:	No: <b>NC19R035</b> 5	Federal FY of O	Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	DEVELOPMENT ACTIVITIES							
NC35-3	Replacement Housing	1499	5 Units	\$37,001.00		\$0.00	\$0.00	No Work
	SUBTOTAL			\$37,001.00		\$0.00	\$0.00	To Date
	GRAND TOTAL			\$37,001.00		\$0.00	\$0.00	

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part III: Implementation Schedule

PHA Name: Sanford Hou Sanford, NC	ising Authority	Capita	Type and Numal Fund Prograscement Housing	nber m No: ng Factor No: <b>NC1</b> :	9R03550101	Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities		Fund Obligate rter Ending Da	ed	Al	l Funds Expended parter Ending Date		Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
NC35-3	09/30/06			09/30/08			PHA has submitted a development proposal to HUD.  Need maximum time frames for expenditure of funds  From obligation end date of 9/30/06.	

NC35-1=120 apts.

NC35-2=50 apts.

NC35-3=57 apts.

NC35-4=100 apts.

NC35-5=25 apts.

NC35-6=55 apts.

NC35-7=40 apts.

## ATTACHMENT M-FY2000 RHF P & E REPORT

Ann	ual Statement/Performance and Evalua	ation Report			
Cap	ital Fund Program and Capital Fund P	rogram Replacemer	nt Housing Factor (	CFP/CFPRHF) Pa	art I: Summary
	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N			Federal FY of Grant: 2000
Ori	ginal Annual Statement Reserve for Disasters/ Eme			)	
	formance and Evaluation Report for Period Ending: 0		nce and Evaluation Repor	t	
Line	Summary by Development Account	Total Estin			Actual Cost
No.					
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	\$36,259.00		\$0.00	\$0.00
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$36,259.00		\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				
	Measures				

## **Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

3/31/05

**Part II: Supporting Pages** 

	ord Housing Authority, Sanford, NC		Number ogram Grant No: ousing Factor Grant	No: <b>NC19R035</b>	50100	Federal FY of 0	Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estir	mated Cost	Total Ac	etual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
	DEVELOPMENT ACTIVITIES								
NC35-3	Replacement Housing	1499	5 Units	\$36,259.00		\$0.00	\$0.00	No work to	
	SUBTOTAL			\$36,259.00		\$0.00	\$0.00	date	
	GRAND TOTAL			\$36,259.00		\$0.00	\$0.00		
				1					

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 3/31/05 Part III: Implementation Schedule

PHA Name: Sanford Housing Authority, Sanford, NC			Type and Numal Fund Progracement Housin		.9R03550100	Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities		Fund Obligate arter Ending Da		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NC35-3	09/30/05			09/30/07			PHA has submitted a development proposal to HUD.
							Need maximum time frames for expenditure of funds
							From obligation end date of 9/30/05.

NC35-1=120 Apts.

NC35-2=50 Apts.

NC35-3=57 Apts.

NC35-4=100 Apts.

NC35-5=25 Apts. NC35-6=55 Apts.

NC35-7=40 Apts.

## ATTACHMENT N-FY1999 RHF P & E REPORT

Ann	ual Statement/Performance and Evalua	ation Report			
Capi	ital Fund Program and Capital Fund P	rogram Replacemen	nt Housing Factor (	CFP/CFPRHF) Pa	rt I: Summary
	ame: Sanford Housing Authority, Sanford, NC	Grant Type and Number Capital Fund Program Grant N			Federal FY of Grant: 1999
	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Revised Annual	Statement (revision no:	)	
⊠Per	formance and Evaluation Report for Period Ending: 0		nce and Evaluation Repor		
Line	Summary by Development Account	Total Estin	nated Cost	Total A	ctual Cost
No.			D 1 1	0111 / 1	
1	TE ( 1 CIED E 1	Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6 7	1415 Liquidated Damages 1430 Fees and Costs				
9	1440 Site Acquisition				
-	1450 Site Improvement 1460 Dwelling Structures				
10	<u>U</u>				
11	1465.1 Dwelling Equipment—Nonexpendable 1470 Nondwelling Structures				
12 13	1475 Nondwelling Equipment				
	14/5 Nondweiting Equipment 1485 Demolition				
14					
15 16	1490 Replacement Reserve 1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	\$12,849.00		\$0.00	\$0.00
19	1501 Collaterization or Debt Service	\$12,849.00		\$0.00	\$0.00
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$12,849.00		\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities	\$12,047.00		φυ.υυ	φυ.υυ
23	Amount of line 21 Related to LBF Activities  Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Security – Hard Costs  Amount of line 21 Related to Energy Conservation				
20	Measures				
	1/10404100				

## **Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)** 

3/31/05

**Part II: Supporting Pages** 

PHA Name: Sanfo	ord Housing Authority, Sanford, NC	Grant Type and Capital Fund Pro Replacement Ho	Number ogram Grant No: ousing Factor Grant	No: <b>NC19R035</b>	50199	Federal FY of 0	Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin		Total Ac	tual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
	DEVELOPMENT ACTIVITIES								
NC35-3	Replacement Housing	1499	5 Units	\$12,849.00		\$0.00	\$0.00	No work	
	T The state of the			, , , , , , , , , , , , , , , , , , , ,		1 2 2 2 2	, , , , ,	To date	
	SUBTOTAL			\$12,849.00		\$0.00	\$0.00		
	GRAND TOTAL			\$12,849.00		\$0.00	\$0.00		
					-			-	

Annual Statement/Performance and Evaluation Report	
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)	3/31/05
Part III: Implementation Schedule	

PHA Name: Sanford Housing Authority,			Type and Nur	nber			Federal FY of Grant: 1999
Sanford, NC				m No: <b>NC19R03</b>	550199		
		Repla	cement Housin	g Factor No:			
Development Number	All	Fund Obligate	ed	A	ll Funds Expended	[	Reasons for Revised Target Dates
Name/HA-Wide	(Qua	arter Ending Da	ate)	(Q	uarter Ending Date	e)	
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
NC35-3	09/30/05	9/29/07		09/30/07	9/29/09		PHA has submitted a development proposal to HUD.
							Need maximum time frames for expenditure of funds
							From obligation start date of 9/30/05. Change to match
						Locc's end dates	

NC35-1=120 Apts. NC35-2=50 Apts.

NC35-2=30 Apts. NC35-3=57 Apts. NC35-4=100 Apts. NC35-5=25 Apts. NC35-6=55 Apts. NC35-7=40 Apts.

#### ATTACHMENT O

## Statement of Compliance with the Community Service Requirement.

The Sanford Housing Authority will comply with the Community Service requirement by coordinating with the City of Sanford and Lee County Human Resources Department, Central Carolina Community College, and Lee County Public School System in identifying a list of volunteer community service positions. Utilizing our partnership with the resident advisory council, the Sanford Housing Authority anticipates the creation of several in-house volunteer positions.

## **ATTACHMENT P Community Service Policy**

### SANFORD HOUSING AUTHORITY

#### COMMUNITY SERVICE AND SELF-SUFFICIENCY POLICY EFFECTIVE JULY 17, 2001

#### 1. Policy Statement:

It is the intent of the Sanford Housing Authority to comply with the Community Service and Self-Sufficiency requirement (24CFR Sections 960.607) of the Quality Housing and Work Responsibility Act of 1998. Each adult resident, other than those qualifying for an exemption as defined in 24CFR part 960.6 shall be required to perform eight (8) hours of community service each month. This service can be provided at any local community, civic or charitable organization. Residents subjected to this requirement have the discretion to select the type and the location of the community service to be provided. Residents may choose to enroll in self-sufficiency program in lieu of performing the required hours of community service. Any resident failing to comply with the requirements of the Community Service and Self-Sufficiency Policy is subject to denial of lease renewal at annual recertification.

#### I. Program Administration:

The Sanford Housing Authority will administer the Community Service and Self-Sufficiency Program. The Authority has developed strong working relationships with the Lee County Vocational Rehabilitation, Lee County Department of Social Services. Boys and Girls Club, Johnston Lee Community Action and Lee County Enrichment Center. The Authority has ongoing economic self-sufficiency activities offered though its partnerships with local service providers. The Authority will incorporate the new Community Service and Self-sufficiency requirement for participation in one of these existing programs for completion of eight hours per month community service. Each agency will maintain attendance records for participants choosing to participate in the economic self-sufficiency activities and or community service activities. Attendance and placement records will be provided to the Authority. The Authority will provide compliance monitoring and verification annually before the end of the twelve (12) month lease term.

#### 3. Compliance Requirements:

Each adult (18 years and older) household member who does not qualify for an exemption is required to:

I. Contribute eight (8) hours of community service, excluding political Activities, each month or

Approved by the AHA Board of Commissioners: March 5, 2001

- II. Participate in economic self-sufficiency activities for eight (8) hours per Month or
- III. Participate in eight (8) hours per month of combined community service or economic self-sufficiency activities.

Residents subjected to the Community Service requirement will perform volunteer work or other duties that are a public benefit in that they serve to improve the quality of life, enhance resident self-sufficiency, and/or increase resident self-responsibility in the community. Community Service is not employment and may not include political activities. The authority will no substitute community service or self-sufficiency activities performed by residents for work ordinarily performed by Authority employees nor will such activities replace a job at any location where residents perform activities to satisfy the service requirement. The Community service requirement may be satisfied by participation in one or more of the following activities:

- Authority sponsored self-sufficiency programs
- Furthering education (i.e., literacy programs, GED classes, continuing education classes or job training workshops, Etc.)
  - Assistance with local charities (i.e., local soup kitchen, habitant for humanities, etc.), other community organizations (i.e., youth, senior/elderly, special populations programs, etc.), and school projects
- Other such services as may be approved by the authority.

Each non-exempt adult household member will be required to complete a community Service Report form each year at annual recertification. The report will include a description of the type of community service or economic self-sufficiency activity completed, provide the date and times of service or participation, and indicate the number of hours completed. Third party verification of the completion of service or participation may be required. The head of household is responsible for lease compliance and is responsible for providing information and documentation as may be requested by the Authority to determine compliance.

The authority will retain reasonable documentation of service requirement performance or exemption in participant files. The Authority will maintain community services records for each adult resident by one of the following methods'

- I. Exempt status determination for those exempt in accordance with the regulations
- II. Completion of attendance/participation log and certification by participating agencies
- I. Completion of a Community Service Log and self-certification by participant with third party verification documentation as required

#### 4. Notification of Requirement:

All residents and applicants for housing shall be notified in writing of the requirements to participate in Community Service and self-Sufficiency activities. A new lease stipulation the Community Service and self-Sufficiency requirements shall be executed with all households in tenancy and all new move-ins.

Notification of Tenants in Residency: The Sanford Housing Authority will publicize information about the requirement and hold information meetings. Each household will receive written notice explaining the requirements and instruction regarding compliance and penalties for failure to comply. The notification will describe the process for claiming status as an exempt person and the PHA verification of such status Residents will be provided notification for compliance in the annual recertification process.

Applicant Notification: all applicants on the waiting list shall be notified of the new Community Service and Self-Sufficiency requirements prior to move-in and all new applicants shall be notified of the requirements at the time of application.

#### I. Exemption:

The authority will provide exemption status to any adult resident who requests such status and who meets one of the following qualifications as defined in 24CFR Part 960.6

A. An individual 62 years of older

- B. A blind or disabled individual, as defined under Social Security Act (42USC416(i)(1); 1382c Section 216(i)(1) or 1614) AND certifies that because of this disability he/she is unable to comply with the service provisions, or is the primary caretaker of such an individual
- C. An employed person
- D. An individual which meets the requirements for being exempted from engaging in work activity under the State program funded under part A of the title IV of the social security Act (42USC 601 et seq.) or under any other welfare program of the State including the state-administered welfare-to-work program
- E. A member of a family receiving assistance, benefits or services under a State program funded under part A of title IV of the Social Security Act (42USC 601 et seq.) or under any other welfare program of the State, including a State-administered welfare-to-work program, and has not been found by the state or other administering entity to be in noncompliance with such a program.

#### II. Request for exemption:

A resident or applicant wishing to be exempt from the service requirement must make such request in writing by completing a request for exemption form. The resident may be asked to provide the Authority with verification of the information used to claim an exemption. The authority will review the request for exemption, make a determination of requirement and those who are exempted.

#### III. Change in Status:

The resident is responsible for reporting any change in status whether exempt or non-exempt between the annual recertification. The Authority will process any report of change in status during the twelve (12) month period between recertifications, issue an interim determination as to the exempt/non-exempt status of the resident and inform the resident of any compliance requirement that may be associated with the change

#### 8. Compliance Monitoring, Review, and Verification:

The authority will review family compliance with the Community Service and Self-Sufficiency requirements and will verify such compliance annually. All non-exempt adults will be required to report and certify as to their compliance with the requirements under the lease approximately ninety (90) days and no less than sixty (60) days prior to the annual renewal date of their lease. The Authority may require the resident to obtain third party verification that he/she has performed such qualifying activities.

#### 9. **Noncompliance:**

Failure to comply with the reporting requirement or to complete the required service on schedule during the lease term is grounds for non-renewal of the lease at the end of the twelve (12) month lease term. The Authority will issue a notice of noncompliance if it is determined that there is a non-exempt adult resident who failed to fulfill their obligations under the Community Service and Self-Sufficiency requirement of the lease and a notice of termination and eviction shall be issued. The authority will issue the family a notice describing the noncompliance and stating that lease will not be renewed at the end of the twelve (12) month term unless the non-compliant resident enters into a written agreement with the authority to cure such noncompliance.

#### I. Remedy for Noncompliance:

The Authority will not renew the lease for a household which is found to be in noncompliance with the Community Service and Self-sufficiency requirement unless the noncompliance with the Community Service and Self Sufficiency requirement unless the head of household and any noncompliant adult enters into a written agreement with the Authority in the form and manner required by the Authority to core such noncompliance by competing the additional hours of community service or economic self-sufficiency activity needed to make up the total number of hours required over the twelve month term of the new lease, in fact completes the required hours of service or activity in accordance with such agreement, and provides

written assurance satisfactory to the authority that all other family numbers subject to the requirement are complying or are no longer residing in the unit.

#### 11. **Right to Grievance:**

All residents shall have a right to a grievance hearing as a result of any action taken by the Authority relative to the implementation of the Community Service and Self-Sufficiency requirements. The authority will provide the resident a notice stating that they may request a grievance hearing on the Authority's determination and that they nay exercise any available judicial remedy to seek timely redress for the authority's non-renewal of the lease because of such determination.

#### 12. Nondiscrimination and Equal Opportunity:

It is the policy of this Authority to comply fully with all federal, state, and local nondiscrimination laws and with the rules and regulations governing equal opportunity in housing. The authority shall not discriminate against any person because of race, color, religion, sex handicap, familial status, or national origin.

### ATTACHMENT Q Progress on FY2000 Missions & Goals

## SANFORD HOUSING AUTHORITY

FISCAL YEAR 2003-2004

PHA GOAL: Expand the supply of assisted housing:

Apply for additional rental vouchers: The SHA will continue to apply for new vouchers as the NOFA becomes available.

Leverage private or other public funds to create additional housing opportunities: In 2003 the Sanford Housing Authority's non-profit submitted a tax-credit application to the North Carolina Housing Finance Agency for sixty (60) Section 8 Project Based apartments. The SHA also submitted another tax-credit application last year. The SHA did not receive approval to project base any Section 8 apartments.

Acquire or build units or developments: In addition to the tax-credit application mentioned above, the Sanford Housing Authority is preparing to construct up to 5 new single-family homeownership units funded in-part with housing replacement dollars. The SHA is on target to meet all above goals. Construction to start 10/1/05.

PHA GOAL: Improve the quality of assisted housing:

Improve public housing management: The maintenance department is continuing to implement its unit turnaround system. Our turnaround time has decreased 50% over the past year.

The occupancy department has created a new system that allows them to offer vacant apartments to those potential residents that are prepared to sign the lease immediately, thus decreasing the lease-up time.

Increase customer service: Housing authority staff is planning to attended customer service workshops provided by housing industry consultants should funds become available.

Renovate or modernize public housing units: The housing authority is continuing to meet its goal of utilizing at least 50% of Capital Funds towards capital improvements.

Demolish or dispose of obsolete public housing: Demolition of 4 units @ Linden Heights NC035001A is to be completed by 9/30/05.

Provide replacement public housing: The housing authority will develop a replacement housing plan for all displaced families as a result of demolition of units. We are in the final stages of building up to 5 replacement units.

Provide replacement vouchers: An application for Section 8 vouchers will be submitted to HUD. If approved, those vouchers will be used to assist those families affected by the demolition of units. The SHA is on target to meet all above goals.

PHA GOAL: Increase assisted housing choices:

Conduct outreach efforts to potential voucher landlords: The Section 8 Director has used flyers and personal contact with local landlords in an attempt to increase the number of landlords participating in the program. Our Section 8 program is at full occupancy at this time.

Implement voucher homeownership program: The housing authority is currently reviewing the Final Rule governing the Section 8 Homeownership Program to see if we have any eligible participants locally. Staff has also attended an informational meeting held by HUD staff concerning the implementation of this program. The PHA plans to fully implement its homeownership program by 10/04.

PHA GOAL: Provide an improved living environment:

Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: The occupancy staff has reviewed each applicant's income so that they can deconcentrate communities by leasing units in communities where deconcentration is a problem.

Implement public housing security improvements: The SHA will continue to work closely with local police on crime prevention measures & has applied for a Weed & Seed Grant for additional security officers.

Designate developments or buildings for particular resident groups (elderly, persons with disabilities): The housing authority continued to manage Stewart Manor and Matthews Court as elderly/handicapped housing. The SHA is on pace to meet all above goals.

PHA GOAL: Promote self-sufficiency and asset development of assisted households objectives:

Increase the number and percentage of employed persons in assisted families: The Family Self-Sufficiency Coordinator has held several public meeting for current and potential family self-sufficiency participants. These meetings have been instrumental with the recruitment of new participants and motivational for the current participants.

Provide or attract supportive services to improve assistance recipients' employability: The housing authority has partnered with local human service providers to assist the residents of public housing become gainfully employed. This partnership is spearheaded from the housing authority's Resident Services Department and includes the Employment Security Commission, Lee County Industries and Lee County Enrichment Center.

Provide or attract supportive services to increase independence for the elderly or families with disabilities: The Resident Services Department has partnered with Lee County Mental Health Department, Lee County Health Department and the Lee County Enrichment Center for the sole purpose of providing services and educational opportunities for our residents that are in need of special assistance. These relationships have served to improve the awareness for special needs in our elderly/handicapped communities.

## ATTACHMENT R

## Resident member on the PHA Governing Board

1. Xes No:	Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)						
A. Name of resident m	nember(s) on the governing board: Ms. April Tibbs						
B. How was the reside							
C. The term of appoin	tment is (include the date term expires): 7/1/04 to 6/30/05						
assisted by the last	PHA, why not? The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  Other (explain):						
B. Date of next term	expiration of a governing board member: 6/30/05						
	C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):						
Winston Hester – Mayo Ed Grogan Jeff Smith	or						
Lowell Hamel							
Howard James							
April Tibbs	pril Tibbs						

### **ATTACHMENT S**

## Membership of the Resident Advisory Board or Boards

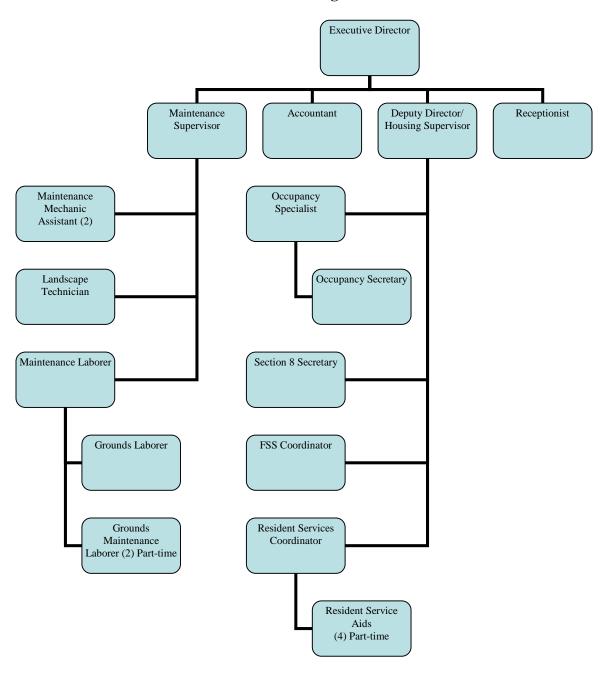
List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

The Resident Advisory Board members are:

Carolyn Johnson – Public Housing Cebrina Gilmore – Public Housing Hyman Wallace – Public Housing Diana Punch – Public Housing Jackie Battle – Section 8

## **ATTACHMENT T Management Organizational Chart**

### **Sanford Housing Authority Recommended Organization**



#### ATTACHMENT U

### **Voluntary Conversion Initial Assessments**

a. How many of the PHA's developments are subject to the Required Initial Assessments?

#### **ALL**

b. How many of the PHA's developments are not subject to the Required Initial Assessments

based on exemptions (e.g., elderly and/or disabled developments not general occupancy

projects)? **NONE** 

- c. How many Assessments were conducted for the PHA's covered developments? **One for each project.**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **N/A**

Development Name	Number of Units

e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: N/A

#### ATTACHMENT V

### **Project Based Voucher Explanation**

There will be two different project based voucher situations. The first is 12 project based units for Brick Capital CDC. There will be 6 - 1BR units, 4 - 2BR units and 2 - 3BR units in this complex. They are located on Vance Street and Price Street in Sanford, N.C. in Census Tract 303.

It is consistent with the plan in that it is targeting two groups of individuals (persons with disabilities and families of domestic violence). The Brick Capital CDC was established by the City of Sanford for the purpose of helping low income families purchase a home.

We are proposing project based rather than tenant based due to a limited number of quality and affordable units available to our Section 8 Program participants in Lee County. We are offering project based vouchers to developers to entice them to build much needed quality units for our residents. We are offering 25 Project Based Vouchers to build a 50 unit senior complex.

### **ATTACHMENT W**

### **Amendments to Section 8 Administrative Plan**

- 1. Establish two waiting lists One for project based applications and one for tenant based applications.
- 2. Establish a priority system for each waiting list.
- 3. Project based priorities:

A. Disabled 200 B. Haven referrals 200

Each will be by the time and date of application with equal weight.

4. Tenant based priorities:

All applicants will be by time and date only.

## **ATTACHMENT X Section 8 Homeownership Statement**

The Sanford Housing Authority can demonstrate the Annual Capacity to successfully operate a Section 8 Homeownership Program by establishing a minimum homeownership down payment of at least 3 percent and requiring 1 percent of the down payment to come from the family's resources.

#### **ATTACHMENT Y**

## **New Project Based Assistance Selection Policy**

#### SANFORD HOUSING AUTHORITY

#### PROJECT BASED ASSISTANCE SELECTION POLICY

The Sanford Housing Authority (SHA) will follow this policy in selecting housing for Project Based Assistance.

- The Housing Authority will advertise that it will accept applications for Project Based Assistance through the Section 8 program in the following papers of general circulation, Sunford Herald. The advertisement will state that the SHA will accept Project Rased Assistance applications for specific projects.
  - The advertisement will run once a week for three consecutive weeks and will specify an application deadline of 30 days after the last advertisement date.
  - The application will state the number of units the SHA plans to assist under the Project Based Assistance Program.
  - The advertisement will state that only applications submitted in response to the advertisement will be considered.
- 2. The SHA has developed the following process to help rank and select applications. The SHA will accept proposals that involve existing housing substantial rehabilitation or new construction. The SHA will use a 100-point ranking system to rate the applications received. The applications will be evaluated on a competitive basis, with those receiving the largest number of points receiving the PBA. The following points will be allocated to each factor. In order to receive points, you must meet the criteria for points described in each factor. If you do not meet the criteria for points, you will receive 0 points.

#### 20 Points - Site Locations and Convenience to Shopping Areas and Human Services

This category focuses on how the neighborhood will affect the proposed development. 24 CFR 983.6 Site and Neighborhood Standards shall serve as a guide for site location. The site must be located in a census tract with less than a 20% poverty rate unless HUD approves the exception.

- Physical conditions of buildings and grounds near the site are acceptable with no noticeable deterioration.
- Existing neighborhood and surrounding land uses are compatible with proposed development. The ideal neighborhood should be primarily residential and have a balance of other land uses, including single-family dwelling units recreational facilities, churches, shopping and services.
  - 20 Points Within ¼ mile of major shopping area with grocery store, drug store, other retail businesses, restaurants and services and/or
    - Within ½ mile of medical services and/or human service agencies and/or
    - Convenient to public transportation (2 blocks, parks, recreational facilities for the general public, libraries.)

CAMy Decauses/Supported Housing/PHA 102/78e/8 PRA Selection Policy 1 Keywood Sanfiad doe

10 Points - Commitment letter or letter of acknowledgement from all funding source

5 Points - Commitment letter or letter of acknowledgment from less than £00% the funding sources.

#### 10 Points - Highest dollar amount spent on construction of a unit.

10 Points - Application with highest dollar amount spent on construction or rehabilitation of a unit.

5 Points - Application with second highest dellar amount spent on construction of a unit.

10 Points - Housing that serves special populations, (Elderly, persons with mental, physical or developmental disabilities, persons with substance use disorders, persons with Aids/HIV, and the homeless) or family housing which offers supportive service through a family Self Sufficiency Program.

In order to receive 10 points, you must serve one of the above-described special populations.

10 Points - Long Term Affordability Guarantees (Willingness to obligate the units as affordable rental housing for lower income person and/or families for 15 plus years).

10 Points - 30 years or more

5 Points - 15 years to 30 years

## 10 Points - Leveraging Other Public and Private Funds to Maximize the Construction Value Per Unit

10 Points - More than 50% of the total funds (sources) come from private sources.

5 Points - 25% to 50% of the total funds (sources) come from private sources.

#### 100 - Maximum Points Available

Consideration will be based on those that meet the housing needs of the SHA and are determined to be in the best interest of the lower income people of Lee County that will benefit from better housing opportunities.

All Perspective applicants will be given a copy of the applicable regulation describing the program and the requirements of the submittal of applications. The application describes the minimum amount of information to be submitted.

- 3. The identity of the developer, owner, builder, architect, management agent (and other participants) and the names of officers and principal members, shareholders, investors, and other parties having a substantial interest; the previous participation of each in HUD programs on the prescribed HUD form; and a disclosure of any possible conflict of interest by any of these parties that would be a violation of the Agreement to Enter into a Housing Assistance Payments Contract (HAP Contract) or the HAP contract itself; and information on the qualifications and experience of the principle participants. Information concerning any participant who is not known at the time of the developer's submission must be provided to the SHA.
- 4. The following applies only to the Acquisition and Rehabilitation of Existing Units.
  - The number of persons (families, individuals, businesses and nonprofit
    organizations) occupying the property on the date of the submission of the
    application;
  - The number of persons to be displaced, temporarily relocated or moved permanently within the building or complex;
  - The estimated cost of relocation payments and services, and the source of funding, and;
  - · The organizations that will carry out the relocation activities.

In signing this application you are certifying that there will be no displacement of any existing tenants from units to receive Section 8 Assistance without following the Uniform Relocation and Real Property Acquisition Act and the requirements of HUD Handbook

- The corner/developers submission to the Housing Authority must include the information of Exhibit 1 entitled "Information to be submitted to the SHA by the Owner for Consideration of Project Based Assistance". Exhibit 1 is incorporated as part of this policy by reference.
- The North Carolina Housing Finance Agency's List of Design Quality Standards and Requirements are included in the SHA Section 8 PBA Policy and Procedure by reference and apply to all new construction and substantially rehabilitated units.
- 24 CFR Part 983 Section 8 Project Based Assistance Regulations are incorporated in the SHA Selections Policy and Procedures for PBA.

I certify that the information contained in this application is true to the best of my knowledge.

Jame

Executive Descrip

Date

#### Selection Policy

#### SANFORD HOUSING AUTHORITY

#### PROJECT BASED SECTION 8 PROGRAM

<u>Purpose:</u> To encourage private for profit and/or non-profit investment in new construction or substantial rehabilitation of affordable housing production in Lee County, North Carolina, the Sanford Housing Authority (SHA) has requested approval from the U.S. Department of Housing and Urban Development to implement a program of Project Based Vouchers.

<u>Turgeting</u>: The proposals for Project Based Section 8 Assistance for new construction or substantial rehabilitation are to be for persons with incomes below 50 percent of the Area Median Income. The units must meet the HUD Housing Quality Standards.

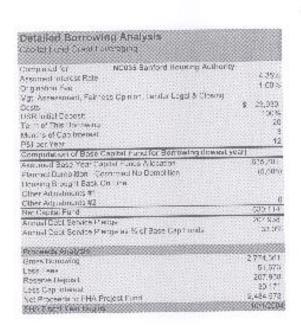
Advertising: The Request for Proposals advertisement will run once a week for three consecutive weeks (a minimum of twenty-one (21) days) and will describe the application process, specify the number of units the SHA estimates it will be able to assist. Only applications submitted in response to this advertisement will be considered. All advertising will be consistent with the SHA and Urban Development (HUD) Regulations.

Advertisements will be in the format attached and will:

- 1. run in the Sanford Herald, Sanford's weekly newspaper of general circulation
- run once a week for three consecutive weeks, specify the number of PBV units, and first published following HUD's approval to implement a project-based program; and
- the deadline for acceptance of owner applications has been established as thirty days after the advertisement is last published.

C. My Documents/Supportive Housing/PHA 1025/Got8 PBA Selection Pulicy Burised Student duc-

## ATTACHMENT Z Capital Fund Grant Leveraging Loan Budget



All interest rates and expanses are assumptions and subject to revision. This is to be used for planning purposes only.

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